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UNITED STATE DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

MARCUS L. WALKER,
Plaintiff,

-V-

Case: 2:21-cv-12874
Judge: Hood, Denise Page
MJ: Stafford, Elizabeth A.
Filed: 12-02-2021
PRIS WALKER VS GREINER, ET AL (DP)

DR. MARY GREINER, PHYSICIAN ASSISTANT
ROSILYN JEAN JINDAL, REGISTERED NURSE
MARY VELARDE, REGISTERED NURSE HENRY
FRESNICK, HEALTH UNIT MANAGER JANET
CAMPBELL, ACTING HEALTH UNITED MANAGER
KIMBERLY KORTE, KAELYNN PFEIL, CONNIE
MCCOOL, DR. JEFFREY BOMBER, MDOC MEDICAL DIRECTOR,
CONNIE WHIPPLE, DR. VIVIEN DORSEY, CHIEF MEDICAL OFFICER
JEFFREY STIEVE, DR. RICKEY COLEMAN, ACTING CHIEF MEDICAL
DIRECTOR, DR. KEITH PAPENDICK, JOHN DOE #1,
MEDICAL DIRECTOR FOR UTILIZATION MANAGEMENT,
RICHARD D. RUSSELL, MANAGER GRIEVANCE
SECTION, STACEY REAM, ARE GRIEVANCE COORDINATOR, DR. JAMES
BRESSMAN, CARMEN MCINTYRE, sued in their individual capacities,
and WARDEN SHERMAN CAMPBELL, MDOC DIRECTOR HEIDI E.
WASHINGTON, CORIZON HEALTH CARE, INC., JOHN DOE #2,
JANE DOE #1, sued in their individual and
official capacities,
Defendants.

COMPLAINT WITH JURY DEMAND

This is a civil rights action filed by Marcus L. Walker, a state prisoner, for damages and injunctive relief under 42 U.S.C. §1983, alleging denial of medical care and cruel and unusual punishment in violation of the Eighth Amendment to the United States Constitution.

JURISDICTION

1. The Court has jurisdiction over the Plaintiff's claims of violation of federal constitutional rights under 42 U.S.C. §1983, §§1331(1) and 1343.
2. The Court has supplemental jurisdiction over the Plaintiff's state law tort claim under 28 U.S.C. §1367.

PARTIES

3. The Plaintiff, Marcus L. Walker, is incarcerated at Gus Harrison Correctional Facility ("ARF") during the events described in this complaint.

4. Defendant Mary Greiner, is a Doctor employed at ARF, an employee of Corizon Health, Inc.

5. Defendant Rosilyn Jean Jindal, is a Physician Assistany at ARF, an employee of the Michigan Department of Corrections (MDOC).

6. Defendant Mary Velarde is a Registered Nurse employed by the MDOC at ARF.

7. Defendant Henry Fresnick is a Registered Nurse (RN) at ARF.

8. Defendant Janet Campbell is the Health Unit Manager ("HUM") employed at ARF via the MDOC.

9. Defendant Kimberly Korte is the Acting HUM ("ARUM") at ARF employed by the MDOC.

10. Defendant Kaelynn Pfeil, is employed at the Henry Ford Allegiance Hospital (HFHA), located in Jackson, Michigan, who acts in the role of 1st Level Review for Pain Management - Consultation.

11. Defendant Connie McCool (ATP) acting in the role of 2nd Level Review employed at HFHA.

12. Defendant Dr. Jeffrey Bomber, is the State Medical Director for Corizon; Dr. Jeffrey Bomber is a chief policymaker with Defendant Corizon Health, Inc.

13. Defendant Rickey Coleman is the Acting Chief Medical Officer (ACMO) as well as the Utilization Management Director (Inpatient) for Corizon.

14. Defendant Connie Whipple is an employee for HFHA Orthopedic Group, acting in the role of 1st Level Review.

15. Defendant Vivian Dorsey, MD is employed at HFHA in the Orthopedic Group.

16. Defendant Jeffrey Stieve is the Chief Medical Officer (CMO) employed by Corizon.

17. Defendant, Dr. Keith Papendick, is the Utalization Management Director for Outpatient, employed by Corizon.

18. Defendant Richard D. Russell, is the Manager Grievance Section employed by the MDOC in Lansing, Michigan.

19. Defendant Sherman Campbell is the Warden at ARF and is in charge of properly training, supervising, direct or control the actions of a subordinate at ARF; employed by the MDOC.

20. Defendant Heidi E. Washington is the Director of the MDOC, and oversees the operations of all correctional facilities in Michigan, including ARF.

21. Defendant Stacey Ream is the Grievance Coordinator at ARF for the MDOC.

22. Dr. James Blessman, is the ACMO for the MDOC.

23. Defendant Carmen McIntyre is the Chief Medical Officer for the MDOC.

24. Defendant Corizon Health, Inc. is an entity out of Brentwood, Tennessee, with an office in Lansing, Michigan. The contract was made via the State program Manager for the MDOC by Marti Kay Sherry; Contract Administrator, DMTB Brandon Samuel; Michael Murphy for the Corizon contract.

25. All the Defendants have acted and continue to act under color of state law at all times relevant to this complaint.

FACTS

26. On February 2, 2018, Plaintiff had injured his right shoulder and arm while working out in the weight-pit.

27. On February 3, 2018, the pain was unbearable. Plaintiff asked a female correction officer to see if he could go to Health Care. Jane Doe called and Plaintiff was sent over.

28. After Plaintiff arrived at Health Care, a nurse saw Plaintiff, looked at his arm, and asked Defendant Jindal to take a look at it. Defendant Jindal told the nurse to give Plaintiff an ACE wrap; which she did.

29. On 2/4/18, Plaintiff again went to Health Care and saw a nurse; Plaintiff showed her the swelling and discoloration in his arm. She took Plaintiff to see Defendant Dr. Mary Greiner, and Defendant Greiner told Plaintiff that she would put him in to see a Specialist in April 2018.

30. Follow-up checks by the nurse was done on 2/27/18, 2/18/18, and 2/26/18. Defendant Jindal on 2/26/18 put in for an ultrasound, which was done on 3/7/18. Saw a RN on 3/13/18; saw Defendant Greiner on 3/15/18.

31. On 4/1/18 Plaintiff filed a medical kite concerning the pain and injury to his right bicep and shoulder, and Plaintiff could not close his right fist and asked for some pain pills for a serious injury. On 3/10/18 a kite response was issued by Defendant Verlarde, RN, stating Plaintiff would be on a scheduled callout to evaluate injury/pain.

32. On 4/1/18, Plaintiff filed a medical kite concerning the pain and injury to his right shoulder and bicep. Plaintiff also complained of a burning sensation and sharp pain in his bicep, elbow, and shoulder; that he could not lay on his right side and could not raise his arm over his head and that his hand cramped up real bad and he was unable to hold anything in his hand and needed to be seen.

33. On 4/2/18, John R. Solomonson, RN sent a kite response, stating there was a Schedule Chart Review Update approximately 4/4/2018 with Mid Level. (Comment: Inmate's request will be passed along to MP for consideration.)

34. On 4/9/18, Plaintiff filed a medical kite stating that in the kite response (4/2/18) that his request would be passed along to MP for consideration. Plaintiff asked what was the timeframe for a response? That he needed to be seen ASAP; that he was unable to use his arms because of the extreme pain in his shoulder, bicep, and elbow; that it was keeping him from sleeping and gettin proper rest (Appx. B). On 4/10/18, RN Solomonson sent a kite response that Plaintiff was scheduled to see MP in the next weeks (Appx. B).

35. After learning that Defendant Greiner had failed to put in for Plaintiff to see the Specialist, Plaintiff filed his Step I Grievance (see Appendix A).

36. On 4/10/18, Plaintiff filed a Step I Grievance because Plaintiff was not being treated for the injury to his shoulder and arm and his rip/torn rotator cup and right bicep. Plaintiff had sent a medical kite on 4/1/18 and 4/2/18, prior to filing this Grievance.

37. On 4/16/18, Plaintiff filed a grievance against Defendant Greiner who stated on 3/15/18 that she would order for Plaintiff to be put in to see an Orthopedic; this did not happen, nor did Plaintiff receive an x-ray, a complete examination of his shoulder, bicep, arm and hand that was injured and in excruciating pain. Step I and Step II were denied, but as soon as Plaintiff filed his Step III with the main office in Lansing, Michigan, Plaintiff was quickly given an M.R.I. and an Ultrasound, even though it was claimed that Step III grievance was filed untimely.

38. On 5/18/18 Plaintiff filed a medical kite asking to be rescheduled because of work and an x-ray appointment for his elbow, that he overlooked the callout by mistake; had the unit officer call to see if he could still go over and a nurse told the unit officer that he would be placed back on the callout. On 5/19/18, Defendant Velarde answered the kite stating: (Comment: MP 5/24).

39. On 6/19/18 Plaintiff filed a medical kite requesting to be seen as a follow-up due to his bicep and right arm; that the problem is that he was having sharp pain and his nerves were jumping in his right bicep real bad for the last two days and he could not lay on his right side and can not sleep due to this problem.

40. On 6/20/18, Defendant Velarde sent a kite advising Plaintiff that he had a Schedule Nurse Sick Call approximately 6/21/2018 with an RN.

41. On 7/9/18 Plaintiff filed a medical kite asking an important question,

stating that he had gone to see one neurologist and why he was not called over and told what was the result and that he had gone to D.W.H. the past Tuesday (7/3/18) and that he had not been seen or let known what the therapist had commented on, such as a request for a cortizone shot and that they both had requested an M.R.I., and wanted to know when would he be called over at least to explain to him about getting cortizone shot. That he needed to be seen due to his pain ASAP and that the Motrins were making his stomach hurt.

42. On 7/12/18, Defendant Velarde sent a kite response stating Plaintiff was to do the physical therapy exercise for one month; that he had a follow-up appointment with the MP in early August; for him to bring his questions then; meanwhile for him to do his best to perform the exercises he was given.

43. A right shoulder radiograph was performed on August 12, 2018. Right shoulder anthrogram on September 5, 2018, there was observed: large subacromial spur; mild osteoarthritis of the acromioclavicular joint there is fluid in the subacromial subletoid burse. There is contrast in the subacromial subletoid bursa; there is normal muscle bulk throughout the rotator cuff; there is a partial-thickness, arsurface tear of the conjoined tendon attachment of the posterior supraspinatus and anterior infraspinatus tendons measuring 3cm x 1.15in traverse and AP dimension with media retraction of the articular surface fibers. The subscapularis tendon is hyperintense on both T1 and T2-weighted imaging related to administration of intra-articular contrast. Biceps tendon: The course and appearance of the long head of the bicep tendon is normal without evidence tendinopathy or tear. There is contrast and fluid in the biceps tendon sheath.

44. On 8.13.18 Plaintiff filed a grievance against Defendant Greiner for not following the recommendation of a bone specialist who asked for an MRI to be done on 6/12/18, and for not treating his arm and shoulder.

45. On September 5, 2018 an MRI was conducted at the Henry Ford Allegiance

Hospital [hereinafter, "HEAH"] under the direct supervision of Eric G. Hoover, MD. Plaintiff was suffering in excruciating pain where his anterior and lateral right shoulder was painful, with right arm numbness and weakness. The right shoulder anthrogram was performed, which showed a large subacromial spur; pain had radiated just past the elbow, weakness and numbness in right arm and hand, decreased ROM. The right shoulder anthrogram was performed prior to the MRI.

46. On 9/15/18 Plaintiff filed a medical kite as a follow-up and to request to see what was going on with the results of the M.R.I. that was taken of his arm and shoulder because he had not seen anyone and because his arm and shoulder is giving him a lot of pain and discomfort and numbness and nerve pain getting worse; that he could not hold anything in his hand as it would drop; that his shoulder was giving Plaintiff a lot of pain; that his other problem was that his lower back disc was giving him a lot of pain, was in his history and he knew why from his x-ray; that he needed to know what was going on ASAP.

47. On 9/17/18 in the kite response given by Defendant Velarde replied that there was no records to convey from the medical record; that Plaintiff had a ccc appointment in late November; discuss the results with the MP at that time; "Otherwise, send another kite in a week or so to see if results have been made available." (Appx B)

48. On 10/22/18 Plaintiff sent a medical kite to be seen for his shoulder pain getting worse and he could not ly on his right side; asked what was up with his situation of seeing a shoulder specialist for his right arm and that the last time he saw Defendant Greiner he asked her to take him off of Motrin and that she was to put him on something else; Motrin was not helping his arm and was getting worse; needed to be seen.

49. On 10/23/18, Defendant Velarde responded that Plaintiff would be scheduled to see a nurse by 10/24/18; approval had been received for orthopedic

consultation; no date was scheduled; callout scheduled to document pain and discuss alternate pain management until seen by MP. Meds not ordered by the nurse.

50. On 10/23/18 it was approved for Plaintiff to see Orthopedic with no set date, which was approximately 8 1/2 months after the injury to the shoulder.

51. On 11/9/18 Plaintiff filed a medical kite as a follow-up after Defendant Greiner had told him the previous week when he advised Defendant Greiner that his arm and shoulder had gotten worse and so was his hand; Defendant Greiner advised Plaintiff that he was approved. Plaintiff told Defendant Greiner that his arm was hurting so bad the day before and that day (11/9/18), that he could not tell if he was having a stroke, that numbness was in his right arm with no feeling; that the medicine that he was receiving was not working; that Defendant Greiner was not listening to his concerns; Plaintiff's hand and arm had sharp pain and that something had to happen; that Plaintiff was currently talking to a lawyer and he needed to be seen now.

52. On 11/9/18, RN Shawn M. Coutts sent a kite response that Plaintiff was scheduled for a nurse visit about 11/13/18.

53. On 12/4/18 Plaintiff filed a medical kite complaining that the medication the doctor prescribed was causing excruciating pain, was making things worse, was having very painful headaches; need to have something done A.S.A.P. concerning the pain that Plaintiff was dealing with in his shoulder; that he Plaintiff stopped taking the medication because it only made things worse not better; Plaintiff needed to be seen A.S.A.P.

54. On 12/5/18, Defendant Velarde sent a kite response advising that a nurse sick call was scheduled for about 12/08/18.

55. On 12/10/18 Plaintiff filed a medical kite due to his shoulder in which he needed pain medication, that he had stopped taking the medication that

Defendant Greiner prescribed, because it was causing headaches and migraine; wanted to know when was Plaintiff going to be seen; Plaintiff was lightheaded and could not sleep; that he had recently been seen by a nurse and the headaches were painful.

56. On 12/11/18, Defendant Velarde filed a kite response advising Plaintiff that he had a scheduled chronic callout [ccc] in February [2019], for his shoulder pain and that the nurse had notified the MP about his complaints; and earlier appointment had not been scheduled. Nothing was done to relieve the pain that Plaintiff was experiencing and was told to wait until February 2019 for assistance. This is a deliberate indifference to Plaintiff's health and a designed delay in giving medical treatment.

57. On 12/13/18 Plaintiff filed a medical kite concerning his arm and shoulder exhibiting sharp pain in his shoulder and numbness underneath his arm and having pain around his chest; that the MP put him on medication which causing him serious headaches and that he had stopped taking the medication and that he needed a different medication to relieve the pain.

58. On 12/13/18, Defendant Velarde sent a kite response telling Plaintiff that a nurse sick call visit was scheduled for 12/15/18. Why would the Plaintiff need a sick call visit, when he needed to have a different medication. Another deliberate delay in medical treatment. Why would Defendants Greiner, Jindal and Bressman of the Pain Committee continue to offer medication that relieved nothing, but only caused more suffering and agony?

59. On January 7, 2019, almost a year later, Plaintiff was sent to the MedSport Orthopedic Surgery Clinic to be seen and examined by Michael Thomas Freehill, MD, who had formulated the treatment plan. Dr. Freehill works t the University of Michigan, and is the Orthopedic, who had made the following observations: 1) Chronic Right shoulder pain after weight lifting approximately

11 months ago, 2) complete rotator tear, 3) biceps tenosynovitis, 4) bursitis with some out of proportion and strength deficit out of proportion. Recommend front-line tx with Physical Therapy for shoulder girdle. Dr. Freehill acknowledge that the MRI revealed near full-thickness tear of the supraspinatus tendon; partial tear of the infraspinatus; biceps tenosynovitis; impingement. In the ASSESSMENT part of the report, it was observed: chronic right shoulder pain, complete rotator cuff tear, biceps tenosynovitis, bursitis. Still, Corizon, the Pain Committee, Defendants Greiner, Bressman and Jindal seen no cause to place Plaintiff on a new pain medication and had shown a deliberate indifference to Plaintiff receiving proper medical attention and treatment.

60. On 1/8/19, Plaintiff filed a medical kite because of the damage to his arm and shoulder and because when he saw the specialist at U.M. [1-7-19], that the specialist had told him and recommended him to do rehab at this time for a couple of months, at least 3 to 4, and stated that if the arm and shoulder did not improve to come back to him for a follow-up; that Plaintiff had sent 2 kites advising Health Care that the medication that Defendant had placed him on was not working and gave him headaches; that he needed to see a Doctor or P.A. to give him some medication that would help due to the pain and that he needed to be seen ASAP.

61. On 1/9/19, Defendant Velarde sent a response that Plaintiff would be scheduled for a nurse sick call about 1/10/19 because of Plaintiff's ineffective pain management; that MP appointment could not be done by request; that Plaintiff had a ccc appointment in February [2019]. This was another example of the practice, procedure and custom of both the MDOC and Corizon to delay treatment. A nurse cannot prescribe medication; the delay until February, a month later is a deliberate indifference to Plaintiff's medical treatment for a damaged shoulder and arm and the pain that Plaintiff was suffering.

62. On 1/17/19 Plaintiff filed a grievance after having sent 4 medical kites to resolve the issue as he had not received proper medical attention by any medical staff and his condition to his arm and shoulder was getting worse and was full of pai, which had spread to his neck and the other shoulder. Plaintiff saw Defendant Fresnick on 1/23/19 who was negative, had smart comments and displayed a deliberate indifference to Plaintiff's health concern.

63. On 1/22/19, Plaintiff sent a medical kite complaining about his arm and shoulder, forearm and bicep as hurting real bad; that Plaintiff had told them all that the medication prescribed to him by the Doctor was not helping in any way and that it gave him headaches and he advised them that he told them about this 3 kites ago, which was still charging him copay for the same problem with each visit and that he needed to be placed on a different medication; that he was experiencing pain under his right chest area and underarm and felt numbness.

64. On 1/22/19, RN Shawn M. Coutts sent a kite response stating that a nurse visit was scheduled for approximately 01/23/2019.

65. On March 14, 2019, Plaintiff was seen at Dwaine Waters Hospital ("DWH"), by Primary Therapist, Scott J. Weaver who made the following Assessment. Rehab Potential: Poor. Comments (Assessment): Decreased shoulder strngth and AROM since getting injection and pain/tenderness has gotten worse. "He was instructed in home exercises for rotator cuff and shoulder girdle strength and advised to follow up in 4-6 weeks if no improvement, which I anticipate, at which time surgery may be warranted."

66. On 3/26/19 Plaintiff filed a medical kite because of the situation with his right arm and shoulder; that he had seen the PT at D.W.H. and was given the same exercise to use to strengthen his shoulder; that he had been placed back on the same medication and that his arm was getting worse and now he was

losing the feeling of his arm and sharp pain under his armpit and wanted to know what did the PT say and that he needed to be seen ASAP; that he could not lay on his right shoulder period.

67. On 3/27/19 Defendant Velarde sent a reply stating that Plaintiff was expected to have a followup with the PT within 4 to 6 weeks of his last appointment. That Plaintiff would be seen following that by the MP; options for plan of care would be discussed at that time.

68. On 7/17/19 Plaintiff filed a grievance against Corizon and their medical staff at the Gus Harrison Correctional Facility, which included Defendants Jindal and Greiner. The Step I was signed by Defendant Ream and ADW White - there were no signature nor interview with medical staff. The Step I simply read "per H.C." Step I was denied on 8/8/19; Step II filed on 8/21/19 and denied on 8/23/19; Step III filed and was denied and mailed back to Plaintiff on 9/23/19.

69. On 8/23/19 Plaintiff filed a medical kite after seeing Defendant Jindal. Defendant Jindal had advised Plaintiff that he had kidney failure but did not tell Plaintiff what was to be done to correct the problem. Defendant Jindal did not recommend any change in medication, etc. Defendant Jindal told Plaintiff that it could be caused by the medication, but never specified which medication, since Plaintiff takes numerous medictaions. Defendant Jindal asked Plaintiff what did DWH say about his kidneys. Defendant Jindal could have learned about this from her EMR in her office. Plaintiff question Defendant Jindal about what was she going to have done about this medical problem, what recommendation(s) did she have, what was she going to recommend for this pain in his kidney, and stated that he needed treatment now. Defendant Jindal displayed a deliberate indifference to Plaintiff's kidney problem coupled with his damaged shoulder, arm and neck.

70. On 9/29/19 Defendant Velarde responded that the issue was renal

insufficiency versus renal failure. Defendant Velarde wrote that "No mention is seen in the most recent MP notes about renal failure. Your lab values indicate that you have reduced kidney function that has been a trend for you for some time now there is no imminent danger. Keep your blood pressure managed and watch your diet. Your labs may improve."

71. It should be noted that a week prior to Plaintiff going to DWH, Plaintiff had asked Defendant Jindal how was his kidneys; Defendant Jindal advised Plaintiff that nothing was wrong. Later on Plaintiff had learned from another nurse that he had been suffering with kidney problems since 2016.

72. On 9/3/19, Plaintiff filed a medical kite. Plaintiff had requested for a copy of this kite.

73. On 9/4/19, Defendant Velarde sent a response concerning multiple complaints by Plaintiff; pain meds; kidney problems; shoulder/arm; leg wound. A new order had been written for his pain medication; that Plaintiff had an appointment scheduled before the end of the year for his shoulder/arm complaint; that Plaintiff's lab values were addressed in a previous kite [the prior week]; that there were no mention of kidney problems in the notes. Defendant Velarde asked Plaintiff what would he like for the HUM to address in addition to "answering these questions?" Defendant Janet Campbell nor Defendant Korte ever reached out to discuss any medical concerns. Just another example of a deliberate indifference to Plaintiff's medical condition and the deliberate denial of medical treatment.

74. On 9/9/19, Plaintiff filed a medical kite to address the matter that he had attempted to resolve with the Defendants, J. Campbell and Jindal. Plaintiff asked Defendant Velarde when did she become a licensed physician to make medical decisions? Plaintiff pointed out that Defendant Velarde had responded to his kites sent to Defendant Jindal, in which Defendant Velarde stated that "there

is no imminent danger. Keep blood pressure managed and watch your diet." Plaintiff pointed out that he had never been on a special diet; that he was suffering from high blood pressure due to the medication that he was given and the medical problems and ailments that had been misdiagnosed and shown a deliberate indifference to. Plaintiff advised Defendant Velarde that "Any kidney problems is a problem that requires immediate attention!" Regarding the HUM [Defendant, J. Campbell], Defendant Velarde stated that Plaintiff has an appointment at the end of the year and that she wanted to know what the HUM should do. Plaintiff replied, that he simply wanted the Defendants to order his treatment and surgery for his arm and shoulder; treatment for his leg; treatment for the swelling in his knees and the reptile skin that was shedding from his feet; order treatment for his kidneys. Plaintiff advised that he had been suffering since 2018 with his arm and that they [the Defendants] were showing a deliberate indifference to his condition; and that the recommendation for therapy which had exasperated the problem. This is what he wanted the HUM [J. Campbell] to handle besides answering his questions. Plaintiff also wanted a copy of his medical kite that he had sent to the HUM [Defendant J. Campbell].

75. On 9/10/19, Defendant Velarde responded: "Comments: No imminent danger with regards to your renal lab values means that your kidneys are functioning at an acceptable level but not optimally. Kidneys are very efficient and indications of renal insufficiency do not become apparent until kidney function has diminished significantly. This is the purpose of monitoring those lab values. Blood pressure management and sensible diet are not medical advice. There was no mention of a special diet. The medical care you are requesting must be ordered by a medical provider [Defendant Jindal]. The HUM is a nurse and cannot order any medical treatment or surgeries. Your kite was forwarded to the HUM in its entirety. The HUM will return your yellow copy."

76. On 9/9/19 Plaintiff sent a second medical kite addressed to Defendant Jindal concerning his kidneys. Plaintiff explained to Defendant Jindal that she had told him on 8/28/19 that he had kidney failure, but that she [Defendant Jindal] had never told him [Plaintiff] what the lab work had revealed, that he had a reduced kidney function that had been a trend for Plaintiff for some time now; Plaintiff asked Defendant Jindal how long has this trend been there and when was she [Defendant Jindal] going to order treatment and a thorough examination and lab work for this problem? Plaintiff explained that he was trying to resolve the matter with Defendant Jindal; that his family is very concerned about this health issue as was he.

77. On 9/10/19 Defendant Velarde intervened and filed a kite response, stating the "Detail, Reason: Not for RN. Addressed to MP". Defendant Velarde states that "Kites are not forwarded to the MP. Enclosed is some information about creatinine levels and some causes of fluctuations in those values. Speak to the MP at your next CCC appointment. Advise your family members to look up information online about renal health to reassure themselves."

78. On 9/17/19 Plaintiff filed a medical kite stating that his right leg from his waist down was in great pain; that he had told the Radiologist when she x-rayed him; that the pain was also running from the middle of his back to the lower portion of his back; that his urine looked the color of a reddish-beige rug, due in part to his kidney problem; that he needed immediate attention for this pain and to determine why his urine was the color that it was.

79. On 9/18/19, Defendant Velarde replied to the medical kite stating that a nurse sick call was scheduled for approximately 09/19/19.

80. On 9/30/19 Plaintiff filed a medical kite stating that he was having pain in his back and that he believed that it was because of his kidneys; that he needed it checked out; that he needed to know what was causing the pain.

81. On 9/30/19 at 2:19 AM, RN Angele M. James wrote back that a scheduled nurse sick call approximately 10/02/19 with RN.

82. On 9/30/19 Plaintiff filed a second medical kite that was answered at 4:10 AM by Angele M. James stating that a nurse sick call was for approximately 10/02/19. Her Comments were: "You have been seen and continue to be under the care of a specialist regarding your shoulder. You have an approved 407 for a surgical consultation so that will be the next step. Nursing will still see you about the leg pain that persists."

83. On 9/30/19, Plaintiff filed a grievance. Plaintiff had spoke directly with Defendant Greiner and had sent a medical kite to Defendant J. Campbell. Defendant Ream denied the Step I grievance on 10/9/19 and ADW Brian Evers, but not medical staff, had signed off the grievance, yet claimed it was "per H.C.". On 10/18/19 Step II was filed and enied on 11/5/19. Step III was filed and denied and mailed back to Plaintiff on 12/5/19.

84. On 10/21/19 Plaintiff filed a grievance for on-going medical problems, in which Plaintiff noted that he had spoke to or written to ADW White, Defendant J. Campbell (HUM), Defendnat Jindal, Defendant Greiner, and several nurses since 2018 through 10/21/19; that the grievance was against Defendant Warden Campbell, Defendant MDOC Director Washington and Defendant Corizon Health, Inc., as well as all the above named.

85. Grievance Coordinator Lawson advised Plaintiff that his Step I was received on 10/29/19 and that Plaintiff would receive an answer no later than 11/19/19. Defendant Ream intervened and asvised Plaintiff that his grievance was rejected; stating that the grievance was received on 10/24/19 and that the Step I grievance regarding OTHER Non-Grievable was rejected. Plaintiff sent Defendant Ream a letter inquiring into how was his grievance non-grievable? Defendant Ream stated that the decision was "H.C.", not hers, and proceeded

to threatened Plaintiff with a misconduct, as though her name was trademark/copyrighted, if Plaintiff used her first name. Step II was filed on 10/28/19 and denied by former Deputy Warden Messer on 11/12/19. Plaintiff filed Step III, which was denied and mailed to Plaintiff on 12/10/19, but not received by Plaintiff until 12/20/19.

86. It has been the policy, practice and custom of Defendant Ream to intervene in all grievances against Corizon and Health Care staff and state it was either, "non-grievable" or did not attempt to resolve.

87. On 11/4/19 Plaintiff filed a medical kite to be seen because of certain problems dealing with his right arm and shoulder that was giving him pain and that now his left shoulder and neck was causing sharp pain and numbness and his left leg, where Plaintiff had been given treatment, due to a hole in the leg giving him pain and pain in his back. Advised them that this was a follow-up for on-going pain.

88. On 11/5/19, RN James sent a reply that Plaintiff was on a scheduled nurse callout for approximately 11/06/2019. Reason: Neuromuscular.

89. On 12/9/19 was seen by Dr. Michael Thomas Freehill, at the University of Michigan, who had recommended a consult with PM-R to work up Plaintiff's neck, schedule image guide (R) shoulder, genohumeral injection, with a follow-up in Clinic PRN. See Appx. C. The Consultant advised Plaintiff that there too many things going on with him that he would not recommend surgery and that the right arm and shoulder were damaged for good.

90. On 12/9/19, Plaintiff filed a medical kite asking to see Defendant Jindal in order to get the results of the off-site visit at U.M. with shoulder consultant; that Plaintiff did not know what all the consultant said and what needed to be done and what the next course of action to take and that Plaintiff had not gotten his results from his x-ray yet that it had been a minute and

he needed to know what was going on with his legs.

91. On 12/10/19, Defendant Velarde replied that Plaintiff had an MP appointment; that he was counseled on the results of his knees and hip images during his recent MP appointment; that his next MP visit was scheduled for February [2020]; that MP appointment are not scheduled by request.

92. On 12/15/19, Plaintiff filed a medical kite stating that he was seen by a Specialist at U.M., that as of today's date [12/15/19] he had not seen a P.A. nor doctor nor RN concerning the results of this visit which is in violation of PD 03.04.100, p 9 of 12, §§WW(1) and (2): (1) Schedule the prisoner for an appointment no later than the next day with a medical provider; (2) Schedule a chart review by a medical provider to be within five business days after the prisoner's return to the facility.

93. On 12/16/19 Defendant Velarde responded, stating that "[A] review of your medical record was performed the same day as your offsite appt. You attended a consultation and no procedure was performed at this time. Discussion of the consultation will be done at your CCC appt in February. You were seen by the nurse upon your return to the facility."

94. While it is true that a nurse had taken Plaintiff's blood pressure and vitals, the nurse did not discuss that visit at U.M. and what the consultant had recommended.

95. On 12/18/19 Plaintiff filed a medical kite stating that this was a request once again to be seen, that he had been sent offsite on 12/9/19 to a specialist for his shoulder and had explained to the specialist about other things hurting him now on his left side of his neck and having sharp pain in his neck and that his shoulder hurt real bad, that his right arm and shoulder was giving him sharp pain and no feeling in his arm, his back having real hot pain and that it hurt when he would go to the restroom; that he had not seen

anyone but this was a serious pain.

96. On 12/18/19, RN Cheryl L. Tucker had scheduled a nurse sick call for approximately 12/23/19 with an RN; for some odd reason RN Tucker claimed the callout was for "constipation and generalized pain". Plaintiff did not make a complaint concerning "constipation".

97. On 12/20/19 Plaintiff was seen by a nurse at Health Care and asked about the recommendations of the Consultant from U.M. but she could not find anything on it. Prior to the visit, Plaintiff was seen and asked about the results, whereby a nurse asked another nurse where was the results and the latter nurse replied that she had given it to the PA., Defendant Jindal.

98. On 12/24/19 Plaintiff filed a medical kite asking to review the results of the Specialist/Consultant from U.M. Plaintiff reported that a nurse could not locate the file; Plaintiff asked what happened to the file and could anyone contact U of M about these recommendations (shot and ultrasound); and asked when would Plaintiff receive the ultrasound?

99. On 12/27/19 Defendant Velarde replied in a kite response that "No mention is seen of the ultrasound. Previously done MRI was re-evaluated by U of M provider. Your next ccc is in February. Discussion of your shoulder pain is included in the itinerary for that appt."

100. At the 12/9/19 visit with Dr. Freehill, there was found a complete rotator cuff tear or rupture of right shoulder. Dr. Freehill had requested on this date and a prior date for a follow-up by him, which had not been complied with. Dr. Freehill had requested an IG Steroid Injection Adult; referral to Sports Medicine & Rehabilitation Adult & Adolescent (PM&R) New Request; that Plaintiff should get an Radiculopathy affecting upper M54.10; and neck Pain. Plaintiff did receive 1 shot and was told that he would receive 3 more which have not been given.

101. On 12/30/19 Plaintiff filed a grievance as an on-going situation. Defendant Ream stated that she had received the Step I on 1/2/20 and that the Plaintiff would receive an answer by 1/23/20; Defendant Ream claimed that the Issue was: "Failed to attempt to resolve the issue with staff". The real Issue was "medical". Plaintiff wrote for a Step II in response to the mislabeled Issue, and also asked for the Step I back and asked why was the Issue "Failed to attempt to exhaust with Staff"? No answer were given.

102. After receiving the Step II form and being advised that the form was to be turned in by 1/17/20. Plaintiff filed the Step II on 1/14/20, which was denied on 1/16/20. Step III grievance [appeal] was filed and denied on 2/28/20. Step I had been denied and signed by former ADW David Messer and Defendant Ream.

103. On 1/30/20 Plaintiff was seen by P.A. Fox, where Plaintiff had learned that an ultrasound was cancelled by John Doe #1; that the shots were pending by the Pain Committee; that Plaintiff had to be examined by a neck specialist; that Defendant Jindal had requested a stronger medication, which was denied by Defendant James Bressman of the Pain Management Committee.

104. Plaintiff's injuries have now spread down to his left shoulder, both legs, his left arm, his lower back and kidneys; Plaintiff has not been issued any new pain medication and continues to live in constant pain and suffering, emotional distress, and is unable to have a comfortable sleep.

105. The persistent delay in providing surgery and medical treatment to Plaintiff's right shoulder, which is now beyond repair and is permanently damaged, has lead to other injuries and pain; Plaintiff has difficulty opening up a bag of potato chips.

106. The delay in providing necessary medical treatment and the pain that has been suffered by the Plaintiff is the sort of "pain and suffering which no one suggests would serve any penological purpose."

107. Plaintiff spoke with former Deputy Warden "John Doe" White concerning his medical kites not being delivered to the proper medical staff. Deputy Warden White asked Plaintiff "when did it become the practice that a prisoner could not write to medical personnel?" Deputy Warden White stated that he would speak to Health Care staff about this. Plaintiff had wrote medical kites to Defendants Jindal and J. Campbell, but Defendant Velarde would not process the kites and told Plaintiff that he could not write to a specific medical staff member, which is contrary to what Deputy Warden White had stated.

108. On 2/27/20, Defendant Jindal had submitted a Consultation Request to Pain Management at the Henry Ford Allegiance Hospital ["HFAH"], instead of Pain Management Committee in Lansing, Michigan. Plaintiff learn of this in May of 2021, which was mailed to him by Carrie Shafer on 6/15/21. Appx. D. This request came a little more than two months after Dr. Freehill's recommendations.

109. The request was denied by Defendant Pfeil, acting in the role of 1st Level Review, Reference Number: 00867997; denied by ATP Defendant McCool, acting in the role of 2nd Level Review on 3/4/20; and by Defendant Papendick, who has a protocol of deferring 90% to 99% of all physician recommendation requests crucial for a prisoner's medical treatment.

110. John Doe #1 was the medical director for utilization management at Corizon, a company for on-site medical services for all state inmate. His job was to review requests for outside treatment, which other medical providers generally submit on a form called a 407. Such requests are necessary for a prisoner to be referred to a specialist with Corizon's referred network. This former individual was Dr. Adam Edelman.

111. On 2/24/21, more than fourteen months after the Specialist recommendation, Defendant Jindal submitted a Consultation Request to HFAH for Orthopedics Consultation (Appx. E). The request was denied by Defendant Whipple,

acting in the role of 1st Level Review; by ATP Defendant Whipple again, acting in the role of 2nd Level Review on 2/24/21; and Defendant Vivian Dorsey, MD.

112. On 2/10/20, Michael Henderson, DO conducted a Therapeutic Right Shoulder Injection at DWH. Plaintiff was seen in the fluoroscopic suite of the radiology department at DWH, presenting chronic shoulder pain.

113. Defendants Washington and S. Campbell abdication of policy-making and oversight responsibilities can and did reach the level of deliberate indifference and resulted in the unnecessary pain and suffering that the Plaintiff had to endure, when they ignored his complaints and condoned the practice, policy and custom of turning a deaf ear to one who is serving a life sentence. Such deliberate indifference has resulted in the unnecessary and wanton infliction of pain to prisoners, such as the Plaintiff, when tacit authorization of subordinates' misconduct causes constitutional injury. It is the disregard of the oversight responsibilities of providing needed surgery that is questioned here. All named Defendants herein may not abandoned their responsibilities to supervise the availability of adequate surgical procedures for prisoners, such as the Plaintiff, which has taken place numerous times in this case.

114. Defendant Bomber is the chief policymaker with Defendant Corizon and was aware of the risk to the Plaintiff when the COVID-19 pandemic swoop the prisoner population at ARE, and had Plaintiff suffer more pain and agony by not providing Plaintiff with protection and the needed surgery ahead of this crisis. Plaintiff had come into contact with the deadly virus, was move to a 8-man cubical setting, in an open "pole-barn"; only to contact the virus, suffer more pain, and have his legal pleadings [grievances] evaporate when packed up by prison officials.

115. Defendant Bressman is the ACMO for the MDOC; Defendant McIntyre is its CMO, who work with both the MDOC and Defendant Corizon to implement policies,

analyze health data, and identify area of improvement for the MDOC. They failed by allowing the deliberate indifference to be inflicted upon the Plaintiff.

116. Defendant Russell denied all Step III grievances against all named Defendants; Defendant Russell approved of, condoned, instead of condemning the deliberate indifference to Plaintiff, instead of upholding policy and conducting an investigation; he was trying to save the State money while neglecting its prisoners, which include the Plaintiff.

117. Defendant Corizon and Defendant Papendick are responsible for ensuring MDOC inmates see the necessary specialist to treat serious medical needs. Pursuant to Defendant Corizon's policy to deny necessary care for non-medical reasons, like cost-saving. Defendant Papendick denied Plaintiff offsite surgery.

118. Defendant Papendick as a supervisor and policymaker for Corizon exemplifies Corizon's policy to deny medically necessary treatment/surgery for non-medical reasons. Defendant Corizon maintains a policy, practice, or custom that requires Defendant Papendick to send prisoners to the hospital or a specialist/consultant but then refuse to follow through with the prescribed and recommended treatment plan in order to save money and minimize the amount of outside medical care provided to incarcerated individuals.

119. At all times relevant to this Complaint, Defendant Corizon's policy makers and decision makers maintained policies, practices and customs that condoned and fostered the unlawful conduct of their defendant employees contracted to work with the MDOC, whereby demonstrating deliberate indifference to the constitutional rights of prisoners.

120. These policies, practices and customs were manifest, but not limited to:

a. failure to provide the medically necessary surgery to and carry out contractual releases to Plaintiff neck, shoulders, arms, and hands, causing permanent damage and degeneration and loss of the ability to make a fist, open a bag of chips;

b. denial of medically necessary pain management;

c. denial of medically necessary surgery that has Plaintiff with one shoulder swollen, while the other is shorter, while not repairing the rotator cuffs; without the ability to lift weights anymore;

d. the failure to provide immediate surgery could have prevented the loss and exercise of a good arm and shoulder;

e. the failure to provide the MRI and recommendation of the Consultant from U.M. until 9/15/21, whereby surgery cannot repair the damage done.

EXHAUSTION OF ADMINISTRATIVE REMEDIES

121. The Plaintiff has exhausted his administrative remedies with respect to all claims and all defendants.

CLAIMS FOR RELIEF NO. 1

122. All of the Defendants named herein, are alleged to have committed 'individual acts' and/or executed Corporate "Policy, Custom or Practice" as Employees of Defendant Corizon Health Care, Inc. that directly contributed to, and was the direct cause of, the several physical injuries to the Plaintiff as stated in paragraphs 26 thru 120.

123. Defendant "Corizon Health Care, Inc", in its 'official capacity' and through the execution of its Corporate 'Policies, Customs and or longstanding Practices', violated the Plaintiff's Eighth Amendment Right to be free from 'Cruel and Unusual' punishment, which was the 'direct cause of' the severe physical injuries to the Plaintiff herein, as stated in paragraphs 26 thru 120. These Corporate Policies, Customs and or longstanding Practices showed a deliberate indifference to the Plaintiff's medical needs when:

A. Defendant Corizon Health Care, Inc., as a matter of Corporate Policy, Custom and longstanding Practice, created a 'bureaucracy' designed to implement and 'rigidity' apply Corporate regulations that resulted in exceedingly long delays in providing serious and needed treatment to the Plaintiff. Moreover, delays that have been ongoing for several years which has caused the Plaintiff to suffer not just continuous pain, but also to have the initial injuries, create and exacerbate new injuries that would not have occurred had the initial injury been medically treated in a timely manner;

B. Secondly, Defendant Corizon Health Care, Inc., through execution of its Corporate Policies, Customs and or longstanding Practices, were deliberate indifferent to the Plaintiff's medical needs when they "prohibit its Medical Employees at the facility where the Plaintiff is confined, from medically treating or providing the needed medical care to the Plaintiff, based upon their noted medical opinion or observations, without first getting approval from other Agents, Employees, Corporate officers or departments of Defendant Corizon Health Care, Inc. Approval which can take months and in this case years, due to a "Red Tape" design of the Corporation, that resulted in years of needless pain and suffering, and has left existing injuries untreated which has caused and or created new severe physical injuries to develop and the permanent loss of and damage to the initial injuries.

124. The actions of Defendants Corizon, Greiner, Jindal, Papendick, Bressman, Whipple, Dorsey and JOHN DOE No. 1, the Pain Management Committee, not approving the medication needed to treat the pain, not referring Plaintiff to an Orthopedic sooner and ordering an MRI ultrasound, x-rays sooner, delay in treating the shoulder injury sooner, had created an irreparable damage to the right, as well as the left shoulder and arm; such action is a deliberate indifference and violative of the Eighth Amendment.

125. Everyday the Defendants, Corison Health Care. Inc., its employees, Papendick, Jindal, Greiner, Coleman, Bomber, and Stieve had prolonged the Plaintiff's agony, pain and suffering by not tretaing Plaintiff's extreme painful condition marked a fresh infliction of punishment which is prohibited by the Eighth Amendment prohibition against cruel and unusual punishment.

126. Plaintiff suffered pain needlessly when relief was readily available is a display of a deliberate indiffence by all named Defendants. Plaintiff had made his concern/complaint known to all known parties via his grievances and medical kites.

127. The unnecessary and wanton infliction of pain experienced by the Plaintiff at the hands of the above-named Defendants violates the Eighth Amendment.

128. The unwritten or informal practices of Defendant Corizon Health Care, Inc., Papendick, Bressman, MDOC employees that qualifies as a 'pervasive custom or practice' of denying medical care for known and serious medical condition or have otherwise refused treatment, by Defendant Corizon using the diagnosis of a less severe medical condition as a pretext for refusing to treat the known underlying condition, by pleading a 'persistent pattern of illegal activity', violates the Eighth Amendment and has left Plaintiff with a permanent damaged and degenerate shoulder and arm.

129. The action of deferring the seeing of an Orthopedic and the request for an ultrasound and MRI by JOHN DOE #1/JANE DOE #1, caused the Plaintiff to suffer pain needlessly.

130. The denial of treatment after the meeting with Dr. Freehill may have resulted in permanent and possibly a life-long handicap for the Plaintiff.

CLAIMS FOR RELIEF NO. 2

131. Defendant Velarde's failure to process medical kites to Defendants Greiner, Jindal and J. Campbell, creating more anxiety and needless stress and pain to the Plaintiff violates the Eighth Amendment.

132. Defendant Ream refusal to process the Plaintiff's medical grievances in order to exhaust his remedies and attempt to resolve the claims, created a state impediment in violation of the First, Fifth, Eighth, and Fourteenth Amendment, i.e., due process and equal protection.

133. Defendant Ream insistent that all Step II appeals go to the Warden instead of the Regional Medical Director and that Step III be sent to the Grievance Department of the MDOC, created a state impediment and a policy, custom or practice of having all grievances process to the rightful authorities for investigation and resolution, violative of the Due Process.

CLAIMS FOR RELIEF NO. 3

134. Defendant Warden Sherman Campbell and his office [Administration] had refused to take Plaintiff's serious medical needs serious, by rubberstamping all Step II grievances filed without any investigation, and without procesing the Step II appeal to the rightful party, i.e., the Regional Medical Director. Defendant S. Campbell was fully aware of Plaintiff's serious medical needs and did not intervene, did not investigate, and failed to uphold and enforce Policy Directive and Operating Procedures 03.04.100, see e.g., pp 5-6 of 12 Corrective And Reconstructive Services, §§AA through CC. Plaintiff is confined and sentenced under the care of Defendant S. Campbell, an employee of the MDOC.

135. The failure of Defendant Washington to enforce the Health Care Policy, 03.04.100, the constitutional rights of the Plaintiff and grant relief to the Plaintiff concerning his grievances and permitting Defendant Russell to deny all medical needs of a grievance, and to enforce the contract between Defendant Corizon and the MDOC, knowing that the Plaintiff needed corrective surgery and pain medication constitutes deliberate indifference to the Plaintiff's serious medical needs in violation of the Eighth Amendment.

136. The failure of JOHN/JANE DOE #1 of the Pain Management Committee, and Defendant Papendick to provide the recommended pain medication, the ultrasound and MRI to determine what is causing Plaintiff's other medical problems that is now preventing the required needed surgery to Plaintiff's right shoulder constitutes deliberate indifference to Plaintiff's serious medical condition and medical needs in violation of the Eighth Amendment.

WHEREFORE, Plaintiff requests that the Court grant the following relief:

A. Issue an injunction ordering Defendnats Corizon, J. Campbell, Jindal, Greiner, Washington, Papendick, and/or their agents to:

1. Immediate arrange for the Plaintiff's ultrasoun, MRI, neck, shoulder, back examination, and right shoulder surgery and/or reconstruction/replacement

of the right shoulder;

2. Immediate arrange for Plaintiff to receive pain medication, his required shots as ordered by Dr. Freehill, and an air mattress until shoulder surgery is completed;

3. Immediately order a "compassionate release" of Plaintiff to house arrest as Plaintiff is currently a "vulnerable person at high risk" with a history of medical issues and needs to be in an environment free of the COVID-19 pandemic and to be in an area with a social distancing of 6 feet or 2 meters.

B. Award compensatory damages in the following amounts:

1. \$100,000 jointly and severally against Defendants Greiner, Washington, S. Campbell, J. Campbell, Velarde, Ream, Papendick, Pfeil, Whipple, McCool, Dorsey, Bressman, and Russell for the physical and emotional injuries suffered as a result of the denial of medical treatment and surgery and for violating their own policies and the Constitution;

2. One Million Dollars against Defendant Corizon Health Care, Inc., Greiner and Jindal jointly and severally for denying medical treatment, pain medication and needed surgery, which caused Plaintiff to live and suffer through extreme pain and anxiety and many sleepless nights, in violation of the Eighth Amendment;

3. \$500,000 jointly and severally against Defendants JOHN/JANE DOE #1 and JOHN DOE #2, Corizon, Papendick, Greiner, Jindal, Bressman for failure to provide adequate medical care, surgery, pain medication to the Plaintiff which had lead to other major medical injuries, such as nerve damage, neck injury, left shoulder injury, arthritis pain, possible Poget disease, and injury and pin in both legs and back.

4. Award \$50,000 jointly and severally against Defendants Velarde and Ream for depriving Plaintiff of his right of access to medical personnel and to grievances, and for these two Defendants rendering their own medical judgment

in violation of the Eighth Amendment.

C. Award punitive damages in the following amounts:

1. One Million Dollars against Defendant Corison Health Care, Inc., and Papendick;

2. \$500,000 against each Defendant Jindal and Greiner;

3. \$100,000 against each Defendant Washington, J. Campbell and S. Campbell;

4. \$50,000 against each Defendant, Velarde and Ream;

5. \$50,000 against each Defendant, JOHN/JANE DOE #1 and JOHN DOE #2.

D. Grant nominal fees in the amount of \$1 each Defendant.

E. Grant such other relief as it may appear that Plaintiff is entitled.

Respectfully submitted,

Dated: November 22, 2021

Marcus L. Walker #374618
Marcus L. WALKER #374618
Plaintiff in Pro Per
Gus Harrison Correctional Facility
2727 E. Beecher Street
Adrian, Michigan 49221-3506

VERIFICATION

I declare under the penalty of perjury that the foregoing is true and correct. 28 U.S.C. §1746(2).

Dated: November 22, 2021

Marcus L. Walker
Marcus L. Walker, affiant
Petitioner in pro se

APPENDICES

APPENDIX A

Date of Grievance filed &
returned with Grievance Code No.

GRIEVANCES

Grievance Code: [ARF-1804-1086-12D1] Step I was filed on 4/10/18: The grievance was against Health Services for denial of medical attention and for failure to provide medical attention to a serious medical need in violation of the 8th Amendment to the U.S. Const., and Const. 1963, Act. I, §15. I sent two kites plus medical kites in February and March of this year. 4/1/18 & 4/9/18 (attempt to resolve). Approximately around February 10 [record said 2/3/18, other record says 2/13/18], I injured my right shoulder and rip/tore my right bi-cep; I also have nerve damage and cannot make a fist. This was in the Step I reason for filing. Step I Response was given on 5/3/18. Step II appeal filed on 5/10/18. Step II Response was on 5/22/18. Filed Step III appeal to Lansing, which claimed there was a timeframe of June 6, 2018 and they got it on June 15, 2018; thus, it was untimely. Decision made on 10/15/18; mailed 10/31/18. Grievance Code No. ARF1804-1086-12D1 was changed to ARF-18-04-1086-28e.

Grievance Code: [ARF-1804-1061-12D1] Step I was filed on 4/16/18 (ARF-2018-04-1061-12D1) against Dr. Alice (sic) [Mary] Greiner. I had spoke to her and she told me that she would submit me to see a specialist, for an MRI, x-rays, and for a complete examination of my shoulder, bicep, arm and hand that are injured. On 4/13/18, I received my medical record and learned that Dr. Mary Greiner had never submitted my name for anything. Step I Response came on 5/3/18; Step II appeal filed on 5/10/18; Response on 5/22/18; Step III denied on 10/11/18, claiming not received until June 15, 2018 with a due date of June 6, 2018. Changed code number at Step III: ARF-18-04-1061-12d1 to ARF-18-04-1061-28e. Mailed on 10/19/18.

Grievance Code: [ARF-1901-227-12D1] Step I Grievance filed on 1/17/19. I had sent 4 medical kites to resolve and still had not received proper medical attention by any medical staff. Saw Mr. Henry Frenick on 1/23/19; Step I response came on 2/14/19 [Grievance Code: ARF1901-227-12D1]. Filed step II on 2/25/19; reply on 3/4/19; mailed 3/5/19; Step III denied on 4/8/19; mailed 4/11/19.

Grievance Code: [ARF-1907-1712-28I] Step I grievance filed on 7/14/19 against Corizon and their medical staff at the Gus Harrison Correctional Facility, which include P.A. Jindal and Dr. Mary Greiner. The step I was denied as not having attempted to resolve with staff. The Step I was signed by the Grievance Coordinator Stacy Reams and ADW White - no signature was from medical staff. I wrote to ADW White and he called me out to discuss the grievance and my kite to him. I wrote to Stacy Ream and she threatened to write me a misconduct for using her name and stated she did not deny the grievance that Health Care did; yet no medical staff member signature is on the document, just "per H.C.". Grievance denied on 8/8/19. File Step II on 8/21/19; denied on 8/23/19; filed a Step III denied and mailed on Sept. 23. 2019.

Grievance Code: [ARF-1808-2101-12f] was filed on 8/13/18; denied on 8/27/18; Step II filed on 9/6/18; mailed on 9/17/18; Step III denied on 1/11/19, mailed 1/15/19.

need
Grievance Code: [ARF-1001-2379-28I] Grievance filed on 9/30/19. spoke with Dr. Mary Greiner and sent kite to H.U.M.; grievance denied by Stacy Ream, Grievance Coordinator on 10-9-19 and ADW Brian Evers - not medical staff; yet, it was claimed "per H.C.". step II filed on 10/18/19; denied on 11/6/19; Step III filed and denied and mailed on 12/6/19.

Grievance Code: [ARF-2019-10-2533-272] Grievance was filed for ongoing complaint, filed on 10/21/19 in which I spoke or wrote to ADW White, HUM Janet Campbell, P.A. Rosilyn Jean Jindal, Dr. Mary Greiner, and several nurses since February 2018 through 1-/21/19; grievance was against Warden Sherman Campbell, Director Heidi E. Washington, and Corizon Health, Inc., as well as the above-named, except ADW White.

I was told by Grievance Coordinator Lawson that my Step I was received on 10/29/19 and that I would receive a response no later than 11/19/19. I then received a Grievance Rejection Letter from Grievance Coordinator Stacy Ream, telling me that my grievance was received on 10/24/19 and that Step I grievance regarding OTHER Non-Grievable was rejected. On 10/27/19, I sent Stacy Ream a letter inquiring into how was my claim non-grievable. She stated that the decision was H.C., not her, and proceeded to threaten me with a misconduct as if her name was Trademark/Copyrighted. I filed Step II on 10/28/19, which was denied by Deputy Warden David Messer on 11/12/19. Filed a Step III, which was denied on mailed on 12/10/19, but received by Plaintiff on 12/20/19.

Grievance Code: [ARF-2020-01-0006-221] I filed a grievance on 12/30/19, as an on-going situation. Grievance Coordinator Stacy Ream stated that she received the grievance on 1/2/20 and that I would receive an Answer by 1/23/20; she stated the Issue was: "Failed to attempt to resolve the issue with staff." The issue was "medical". I wrote for a Step II appeal form and asked why the Issue "Failed to attempt to resolve the issue with staff" and where was the Step I? She sent the Step II form and stated that it had to be filed by 1/17/20. I asked how could the Answer be given by 1/23/20, but the Step II had to be filed by 1/17/20? Ms. Ream did not answer. The Step I was an on-going situation in which I had went to U.S. and seen a Consultant; he had recommended a particular shot and an ultrasound. Health Care claimed no knowledge of this. I grieved the fact that I was to be seen the next day by a P.A. and/or nurse and a Chart Review within 5 business days. I kept being told that I would be seen at Chronic Care in February 2020. The Step I was denied and signed by Ream and ADW Messer — these are not Health Care personnel. I filed a Step II on 1/14/20, which was denied on 1/16/20. Filed a Step III which was denied.

Grievance Code: [ARF-2020-12-2458-1271] Filed a grievance on 12/24/20; Grievance Coordinator Lawson advised that he received it on 12/29/2020, and that I would receive an Answer by 1/19/2021. On 2/9/21 the grievance was denied by RN Michelle Gilbert, RN; and signed by the Reviewed, A/HUM Kimberly Korte on the same date. The denial stated that the MP had ordered x-ray on 10/2/2021 [sic]. The X-Ray department had been closed due to the Facility being on "outbreak status" for COVID-19. The in Mid-November that the grievance was considered a close contact case for the virus and then on 12/20/20 prisoner because positive for the virus. Theat the grievance still had a plan of care in place. The Step II appeal was received 2/22/21, and to be resolved by 3/15/2021. Asked for an extension until 3/29/2021; the Step II was denied stating that Grievant had x-rays pending but that there are delays in "non-urgent/emergent" appointments due to COVID-19. On 4/8/21 the Step III was denied and mailed to Grievance on 4/12/2021. The response was that Grievant;s medical needs are being appropriately addressed.

Grievance Code: [ARF-2021-03-0349-1201]* Filed grievance on 3/4/2021; received by Ms. Reams on 3/8/21; stated that Answer would be by 3/29/21. On 3/25/21 the grievance was denied in a letter stating "failed to attempt to resolve the issue with staff". *Was informed that the Grievance Identifier had been changed to [ARF-2021-03-0349-281]. Step II was received by Mr. Lawson on 4/13/21; informed

Answer would be by 5/4/21. On 4/19/2021 the Step II was denied by Warden Campbell. Step III was filed and denied on 7/19/21, stating that the issue could not be appeal to them; additionally they ruled that "THE REJECTION IS UPHELD"

Grievance Code: [ARE-2021-05-0859-272] On 5/20/21 Grievance filed a Step I grievance; received by an Edmond in the Grievance Coordinator's Office on 5/24/21, who stated that a reply would be due by 6/14/21. On 5/24/21, Step I was denied, claiming it was "Non-Grievable Issues. No violation of policy." On 5/28/21 Step II was filed and rejected by the Warden's Office saying "Upheld Step I decision." On 6/21/21 Step III was received and denied on 9/9/21, stating "THE REJECTION IS UPHELD."

APPENDIX B

Chronological Order of Grievances

CHRONOLOGY

3-9-2018 Medical Kite: This kite is contain do to two items i am having very serious pain biceps and shoulder which I have hurt myself from dead lifting which I need some pain pills and also I can not close my right fists next I need another detail the issues to I was told not to go to weight pit or lifting anything heavy at work my detail end on 2-20-18 I have a weight pit detail and I was written a ticket for not being at the weight pit I need to show I could not workout do to nurse also P.A. order and I have legal detail and still ACE wrap. And when I get my result from (Didn't). And can you send me detail.

3/10/18 Kite Response [Mary Velarde, RN]: callout scheduled to eval injury/pain. Your special accomodation states "no sports". That should exclude you from the weight pit, however you are still out of place if you are not where the itenerary calls for you to be.

4-1-18 Medical Kite: This ia a follow-up do to the injury to my right arm the bicep and shoulder is now getting worsen I seen doctor and I need to no what up with the request to Lansing she put in for my situation. I am having burn situation and sharp pain in my bicep and elbow and my shoulder I can not lay on my right side period or ~~care~~ ^{use} it over my head and my hand cramp up real bad and I cannot hold anything in my hand need to be seen.

4/2/18 Kite Response [John R. Solomonson, RN]: Detail, Schedule Chart Review/Update approx 04/04/2018 with Mid Level by John R. Solomonson, RN. Reason: Inmate is requesting to let MP know that bicep/shoulder injury is worse. Inmate wants to know if request to Lansing has come through. He states he has sharp pain in bicep, elbow, and shoulder. Comments: Inmate's request will be passed along to MP for consideration.

4-9-18 Medical Kite: In my kite response you said my request was passed along to MP for consideration. What is the timeframe for a response? I need to be seen ASAP, I am unable to use my arms because of the extreme pain in my shoulder, bicep, and elbow. It is keeping me from sleeping and getting proper rest.

4/10/18 Kite Response [John R. Solomonson, RN]: Inmate is schedule to see MP in two weeks.

5-18-18 Medical Kite: This is a request to ask will I be place back on callout the reason I miss my callout to see the doctor today. My reason for miss I was having alot of callouts at 07:30-0:800 it be my work detail quartermaster I overlook it I thought it was my work detail instead a doctor callout and same time I had to take x-ray today for my elbow. The C.O. call the unit for me but I talk to her she ask the doctor do she still want to see me even though it was past the callout she told offider I will be place back on callout can you tell me will it be this coming week

5/19/18 Kite Response [Mary Velarde, RN]: Comment: MP 5/24.

6-19-18 Medical Kite: This is a request to be seen as this is a follow-up do to my bicep and my arm which it my right. My problem are at this time my right hand is cramping up real bad and my forearm to almost to my shoulder I am having serious sharp pain and my nerve be jumping in my right bicep real bad for last two days and I can not lay on my right side and I can not sleep do to this problem.

6/20/18 Kite Response [Mary Velarde, RN]: Detail, Schedule Nurse Sick Call approx 06/21/2018 with RN.

7-9-18 Medical Kite: This is a important question, went to see one neurologis you have not call me over there to tell me what is what now went D.W.H. this past Tuesday you having call me over to let me no (sic) or send me to therapist comment which he request for me a cortizone shot and they both request for M.R.I. so now when I am go be call over to at least explain to me about of getting

this cortizone shot etc. I need to be seen do (sic) to my pain ASAP and these Motrin making my stomach hurt. "mere neglect" (Stoudemire v. Mich. 705 F2d 360 6th Cir 2013).

7/12/18 Kite Response [Mary Velarde, RN]: Details: You were instructed to do the physical therapy exercises for one month. Comment: You have a followup appt with the MP in early August. Bring your questions then. Meanwhile do your best to perform the exercises you were given.

9-15-18 Medical Kite: This is a follow-up request to see what going on with my result I took for my M.R.I. for my arm I have not seen anyone on that yet because my arm and shoulder is giving me alot of pain and discomfort and numbness and nerve pain getting worse I really cannot hold anything in my hand I drop it and my shoulder is giving me alot of pain. And my other problem my back lower back my disc on left is giving me alot of pain it in my history now I no (sic) why from x-ray I need to no (sic) what going on now ASAP.

9/17/18 Kite Response [Mary Verlade, RN]: Detail Reason: Musculoskeletal pain. Details: MCR results. comment: No results are available to convey to you from the medical record. You have a ccc appt in late November. Discuss the test results with the MP at that time. Otherwise, send another kite in a week or so to see if results have been made available.

10-22-18 Medical Kite: This is a request to be seen do for my shoulder pain is getting worse now I cannot even lay on my right side period and whats up on the situation do to shoulder specialist for my right arm period and last time I ~~go~~ the doctor I told her to take me off the Motrin and she suppose to put me on something else Motrin is not helping my arm is getting worse do to this follow-up need to be seen.

10/23/18 Kite Response [Mary Verlade, RN]: Detail Schedule Nurse Sick Call approx 10/24/2018 with RN. Details: approval ~~has~~ (sic) been recieved (sic) for orthopedic consultation, no date has been ~~has~~ selected as of yet. Comment: call out scheduled to document pain and discuss alternative pain mandagement until seen by the MP. Meds are no ordered by the nurse.

11-9-18 Medical Kite: This is a kite with detail and a follow I just saw the doctor last week, do to the reason of my shoulder she told me I was approve but, I told her my arm not just my shoulder getting worser my hand. My arm was hurting so bad yesterday and today I could not I was having a stroke that how numbness my arm is no feeling. The medication she giving me not working the thing I tell her she not listen dealing with and feeling my head and arm and sharp pain something got to happen at this moment I am talking to a lawyer and I need to be seen now.

11/09/18 Kite Response [Shawn M. Coutts, RN]: Detail Schedule Nurse Visit approx 11/13/2018. Reason: Muskuloskeletal. Comment: Call out scheduled.

12-4-18 Medical Kite: This is a follow-up dealing with the medication the doctor has prescribed for me I am experiencing excruciating pain This medication is making things worst This medication is giving me very painful headaches I need something to be done A.S.A.P. concerning the pain I am having dealing with my shoulder I stop taking the meds and need to be seen A.S.A.P.

12/05/18 Kite Response [Mary Velarde, RN]: Detail Schedule Nurse Sick Call approx 12/06/2018 with RN Mary Velarde, RN. Reason: pain. Comment: callout scheduled.

12/10/18 Medical Kite: This is a follow-up do about my shoulder which I need pain medication I stop taken the medication the Doctor gave me was given me headaches and migraine is I am go be seen do to this issueds (sic) lighthhead and I can not sleep. I just been seen by nurse my shoulder and headaches is painful need to be seen.

12/11/18 Kite Response: [Mary Velarde, RN]: Comment: You have a ccc appt in February. There is an appt scheduled for your shoulder pain before the nurse

notified the MP about your complaints. An earlier appt had not yet been scheduled.

12-13-18 Medical Kite: This is a follow-up dealing with medical treatment dealing with my arm or say shoulder I am having serious pain in my shoulder sharp pain and having sharp pain and numbness underneath my arm and having pain around my chest. The MP put me on pain medication which is given me serious "headache" and I stop taken it I need to be seen now and need different medication for my pain at this moment this is called Deliberate medical indifference.

12/13/18 Kite Response [Mary Velarde, RN]: Detail schedule Nurse Sick Call approx 12/15/2018 with RN. Comment: Callout scheduled.

1-8-19 Medical Kite: This is a follow-up do to my arm and my shoulder I saw the shoulder specialist at U.M. yesterday and he told me he want me to do rehab at this moment ... at least three to four ..., he also said my arm and shoulder not better to come back to him, but I told Health Care two kits ago that the medication the doctor put me on is not working and it gives me headaches I need to be seen by doctor or P.A. to give me some medication will help me do to the pain I have now and to be seen ASAP! [could not make out everything in this medical kite, thus the reasons for the ...]

1/09/19 Kite Response [Mary Velarde, RN]: Detail Schedule Nurse Sick Call approx 01/10/19 with RN by Mary Velarde, RN. Reason: ineffective pain management. Comment: MP appt not scheduled by request. CCC in February. callout scheduled for nurse visit to discuss ineffective pain management regimen.

1-22-19 Medical Kite: This is a continue issues or same problem with my arm now and shoulder, my forearm and bicep is now hurting real bad. I told you'll the medication the doctor gave me is not helping and it give me headache and I told you'll in three kites ago which you'll still charging me every visit. At this moment I am not getting the right medical treatment I need to be on different medication. Under my right chest area and underarm I been getting sharp pain and numbness.

1/22/19 Kite Response [Shawn M. Coutts, RN]: Detail Schedule nurse Visit approx 01/23/2019. Reason: Muskuloskeletal. Comment: call out scheduled.

3-26-19 Medical kite: This is a follow-up do to the situation of my right arm and shoulder I saw the PT down Dwayne waters and he give me again the same exercise to used to strengthen my shoulder. I have been place back on the same medication I was taken off before the Celebrex is not helping and my arm is getting worsen and now I am loosing (sic) the feeling of my arm and sharp pain under my armpit and what did PT say and I need to be seen ASAP I cannot lay on my shoulder period.

3/27/19 Kite Response [Mary Velarde, RN]: Comment: You are expected to have a followup with PT within 4 to 6 weeks of your last appt. You will be seen following that by the MP. Options for plan of care will be discussed at that time.

8/28/19 Medical Kite: On 8/28/19, I saw P.A. R. JINDAL AND SHE ADVISED ME THAT I have kidney failure but did not tell me what was do (sic) be done to correct the problem. She did not recommend any change in medication, etc. She told me that it could be caused by medication, but never said what medication, since I take a lot of different kinds of medication. She asked me what did DWH say about it. She could have found this out on the computer screen in her office. My question to P.S. Jindal is what are you going to do about this medical, problem? What recommendation(s) do you have? What are you going to recommend fr this pain in my kidney? I need medical treatment now!

8/29/19 Kite Response: [Mary Velarde, RN]: Detail Reason: renal insifficiency renal failure. Call details: Comment: No mention is seen in the most recent MP notes about renal failure. Your lab values indicate that you have reduced

kidney function that has been a trend for you for some time now there is no imminent danger. Keep your blood pressure managed and watch your diet. Your labs may improve.

9-03-19 Medical Kite: Cannot find this kite, but do have the response, below.

9/04/19 Kite Response [Mary Velarde, RN]: Detail Reason: multiple complaints. Details: Pain meds; kidney problem; shoulder/arm; leg wound. Comment: A new order has been written for your pain medication. The other order expired. Pharmacy has not yet processed the new order. You have an appt scheduled before the end of the year for your shoulder/arm complaint. Your lab values were addressed in a kite last week; no mention of kidney problems in the notes. Your leg wound is getting regular care and is noted to be improving. What would you like for the HUM to do in addition to answering these questions?

9/9/19 Medical Kite: This is to address the matter that I attempted to resolve with the HUM and P.A. Jindal. When did you become a license physician to make medical decisions? You told me in regards to the kite to Jindal, that "there is no imminent danger. Keep blood pressure managed and watch your diet." I have never been on a special diet; I am suffering from high blood pressure due to medication given out and the medical problems and ailments that have been misdiagnosed and neglected. Any kidney problem is a problem that requires immediate attention! Regarding the HUM, you stated that I have an appointment for the end of the year and you wanted to know what the HUM should do? Simply, order my treatment and surgery for my arm; treatment of my leg; treatment for the swelling in my knees and the reptile skin that is shedding from my feet; order treatment for my kidneys. I have been suffering since February 2018 with my arm and keep getting spinned; recommendation for therapy which has exasperated the problem. This is what I want the HUM to handle besides answer my questions. I also want a copy of the medical kite I sent th[e] HUM - you failed to return my copy when you sent the Kite Response. [NOTE: This was for RN Mary Velarde to answer]

9/10/19 Kite Response [Mary Velarde, RN]: Comment: No imminent danger with regard to your renal lab values means that your kidneys are functioning at an acceptable level but not optimally. Kidneys are very efficient and indications of renal insufficiency do not become apparent until kidney function has diminished significantly. this is the purpose of monitoring those lab values. Blood pressure management and sensible diet are not medical advice. There was no mention of a special diet. The medical care you are requesting must be ordered by a medical provider. The HUM is a nurse and cannot order any medical treatment or surgeries. Your kite was forwarded to the HUM in its entirety. The HUM will return the yellow copy.

9/9/19 Medical Kite: P.A. R. Jindal this is my second kite to you concerning my kidneys. You told me on 8/28/19 that I had kidney failure, but you never told me that the lab work revealed that I have reduced kidney function that has been a trend for me for some time; how long has this trend been there and when are you going to order treatment and a thorough examination and lab work for this problem? I am trying to resolve this matter with you. My family is very concerned about this health issue as am I.

9/10/19 Kite Response [Mary Velarde, RN]: Detail Reason: Not for RN. Details: Addressed to MP. Comment: Kites are not forwarded to the MP. Enclosed is some information about creatinine levels and some causes for fluctuations in those values. Speak to the MP at your next CCC appt. Advise your family members to look up information online about renal health to reassure themselves.

[NOTE: I had sent these two medical kites addressed to the HUM and P.A. Jindal, per the advise of ADW White].

9/17/19 Medical Kite: My right leg from the waist down is in great pain; I had

told this to the radiosolist (sic) when she x-rayed me; the pain is also running from the middle of my neck to the lower portion of my back. My urine looks the color of a reddish-beige rug, due in part to my kidney problem. I need immediate treatment for this pain and to determine why my urine is the color that it is.

9/18/19 Kite Response [Mary Velarde, RN]: Detail Schedule Nurse Sick Call approx 09/19/2019 with RN by Mary Velarde, RN. Reason: leg pain/dark urine. Comment: Callout scheduled.

9/30/19 Medical Kite: I am having pain in my back and I believe that it is because of my kidneys; I need this checked out. I am still experiencing pain on both of my legs. I need to know what is causing this pain. FOLLOW UP!

9/30/19 [Angele M. James, RN]: Detail Schedule Nurse Sick Call approx 10/02/2019 with RN by Angele M. James, RN. Reason: Musculoskeletal. Details: ... shoulder pain ... leg pain... Comments: You have been seen and continue to be under the care of a specialist regarding your shoulder. You have an approved 407 for a surgical consultation so that will be the next step. Nursing will see you about the leg pain that persists. [Time: 4:10 AM, 2nd Response].

9/30/19 Kite Response [Angeles M. James, RN]: Detail Schedule nurse Sick Call approx 10/02/2019 with RN by Angeles M. James, RN. Reason: Musculoskeletal. Comment: Callout scheduled. [Time: 2:19 AM; 1st Response]

11-4-19 Medical Kite: This is a request to be seen do of certain problem my right arm and shoulder is giving me pain and now my left shoulder and neck is giving me sharp pain and numbness and my left leg where I have treatment do the the hole is giving me pain and my back this is a followUp also for the on-going pain.

11/5/19 Kite Response [Angele M. James, RN]: Callout scheduled. Kited complaints are subject to copay. Follow-ups are exempt from copay only when requested by the QHP.

11/2-9-19 Medical Kite: This is a kite to see the P.A. to get my results of off site to U.M. shoulder specialist on the above date 12-9-19 I don't no what all the specialist said and what need to be done and what the next action to take and I have not even gotten my results from my hip x-ray yet it been a minute I need to no what going on with my legs. That is a follow-up I just seen the specialist I have not been told nothing dealing with offsite and x-rays my next step to get my attorney involved dealing with my situation.

12/10/19 Kite Response [Mary Velarde, RN]: You were counseled on the results of your knee and hip images during an MP appt recently. Your next MP appt is scheduled for February. MP appt are not scheduled by request.

11/2/15/19 Medical Kite: I was seen by a Specialist at Universiity of Michigan, as of today's date I have not seen a P.A. nor Doctor nor RN concerning the results of this visit which is in violation of PD 03/04/100, p 9 of 12, SWW(h) and (2): (h) schedule the prisoner for an appointment no later than the next business [day](sic) with a medical provider; (2) schedule a chart review by a medical provider to be completed within five business days after the prisoner's return to the facility.

11/2/16/19 Kite Response [Mary Velarde, RN]: A review of your medical record was performed the same day as your offsite appt. You attended a consultation and no procedure was performed at this time. Discussion of the consultation will be done at your CCC appt in February. You were seen the nurse upon your return to the facility.

12-18-19 Medical Kite: This is a request to be seen once again or say a follow-up but I was seen offsite on 12-9-19 to [see](sic) a specialist for my shoulder I explain to him now about other things is hurting on me my left side of my neck having sharp pain and my shoulder hurting real bad my right arm and shoulder giving me sharp pain and no feeling in my arm my back is having real hot and

12-18-19 Medical Kite: This is a request to be seen once again or say a follow-up but, i was seen offsite on 12-9-19 to a specialist for my shoulder i explain to him now about other things is hurting on me my left side of my neck having sharp pain and no feeling in my arm my back is having real hot and pain and it hurt when i go to restroom i have not seen anyone but this is very serious pain.

12/18/19 Kite Response [Cheryal L. Tucker, RN]: Detail, Schedule Nurse Sick Call approx 12/23/2019 with RN by Cheryal L. Tucker, RN. Reason: Musculoskeletal. Comment: Call out scheduled for constipation and generalized pain.

12/24/19 Medical Kite: I was seen by a Specialist/Consultant at University of Michigan; it was recommended that I receive a special type of shot and a ultrasound, which I have yet to receive. On 12/20/19, I was seen by a Nurse at Health Care and I asked her about these things, but she could not find anything about it. What happened to the recommendation? Can anyone contact U of M about this recommendation? When will I receive the ultra-sound [sic]?

12/27/19 Kite Response [Mary Velarde, RN]: Detail, Reason: Offsite recommendations. Details: Ultra sound and surgery for shoulder repair. Comment: No mention is seen of the ultrasound. Previously done MRI was re-evaluated by U of M provider. Your next ccc is in February. Discussion of your shoulder pain is included in the itinerary for that appt.

10/1/20 Medical Kite: This is a on-going issues do to my health and i am having any treatment or, so i am having serious pain at my right shoulder and arm and numbness. The Specialist request a couple of things for me but i have not heard anything do to this pain and suffering each day need to be seen ASAP! (This is a follow-up)

10/3/20 Kite Response [Angele James, RN]: Plan/Action: Nurse visit requested. You have been seen by the medical provider and have been prescribed medication to help. A request for you to see the pain management clinic was sent to Lansing and denied. Co-pays are charged for the nurse assessment, they are not waived just because you have been seen for this complaine before. Follow-ups which are exempt from co-pay must be requested by the health professional. Regular co-pay rates will apply.

10-1-20 Medical Kite: This is a second kite which i don't understand if i have more issues i have to do one at a time which it say (check one or more). But i am having serious pain in my middle and lower back where my disc at and it got my right leg of having numbness and sharp pain around my private parts and it hard for me to walk or stand and have witness who can tell you that i been sealing with that for a long time need to be seen ASAP!

10/2/20 Kite Reponse [Angele James, RN]: Plan/Action: Nurse visits usually address only one complaint due to time restrictions. The "check one ot more" option you are referencing is for the department that you are sending your kite to; however, kites are routed more efficiently when only requesting one department per kite. You are being scheduled a nurse visit to address your back pain. In the meantime you can perform the back strengthening exercises that are enclosed to increase strength around your discs resulting in less pain. Perform them daily.

11-8-20 Medical Kite: This is a request to be seen do of my lower back and my hip hurt so bad i have been seen for my shoulder and neck by L.P.N. she change my pain pill which they not helping me i was told by nurse if still have pain to fill out another kite so this is my second kite. I have pain in my back and hip for years it hard to walk and having sharp pain by my groin, need to be seen ASAP!

11/10/20 Kite Response [Kevin Runyan, RN $\frac{1}{2}$]: Plan/Action: You might have been already called out for your annual health screen before you get this kite

response which would save you an appointment. If not please rekitte once more and you will be put on the call out list.

11/14/20 Medical Kite: I am in constant chronic pain in my neck, leg, shoulder and arm. I was seen by Dr. Freehill who gave a recommendation for me. Has Corizon reviewed and 407 requests on my behalf for offsite treatment? Has the MDOC review any RMO requests to get me treatment? Has anything been submitted to Pain Management Committee? I need treatment for the damage done to my shoulder and neck. The pain is excruciating and hard to sleep at night. This is an on-going problem since February 2018. The delay has caused further damage which could have been avoided.

11/15/20 Kite Response [Angele James, RN]: Plan/Action: There are no pending requests for offsite treatment. A request was sent for you to see the Pain Committee back in February but it was denied. You have a chronic condition which is causing your pain and you have been prescribed medications to help. The medical provider has ordered an x-ray of your should to assess for other injury. Can you please explain the further damage you have endured? Yout medical record indicates you have a torn rotator cuff but there are no other diagnoses to support additional damage. Wait for your x-ray and the results from that.

12-5-20 Medical Kite: This is a request to have most of my med refilled (PROTONIX-PRICID-TYLENOL-SENNA and this is a very important question i was given a stronger High blood pressure pill and a new pain pills they are (NORVASC) for blood pressure and (VOLTAREN), can you explain to me if i am go start taken them than the other can please let me no and thank you for your time.

12/7/20 Kite Response [Angele James, RN]: Plan/Action: Your important question is unclear; however, you were seen by the medical provider on October 20 and at that time you were asvised to discontinue your clelbrex and take the voltaren instead. Your blood pressure medication should be taken as prescribed. Your medication refills have been requested.

12-10-20 Medical Kite: I'm writing because I've been made aware that when I became positive for Covid 19 we are being issued new vitamins (Zing, D-3, B-1, Vit C), I am really run down and sick, I was fine until I was placed over on the South Side in a contaminated unit that [was not] or is not cleaned prior to putting new inmates in them.

12/11/20 [Angele James, RN]: Plan/Action: Your vitamins have been ordered. They will be issued to you when they arrive. It is expected that you will not feel well, you have COVID 19. Units are cleaned thoroughly between occupants. If you have the virus, you have the virus. Your symptoms are not correlated with the amount of exposure, symptoms are your body's way of dealing with the sickness.

12-21-20 Medical Kite: Yes, this is a request to be seen as this again a follow up do to serious pain in my shoulder and right arm and neck issues also i seen the specialist last Dec-9-19 i sent a kite to health care which i was told that i suppose to be getting x-ray. The most issue is that even Covid-19 pandemic that should not stop to get me look at or to be submitted to see the specialist at U.M. my should is getting small and i am losing feeling in my right hand and numbness every day.

12/21/20 Kite Response [Kevin Runyan, RN]: Plan/Action: You have a chronic care appointment scheduled to address your situation.

1-8-21 Medical Kite: This is a request to be seen the last kite issues told that i have ccc appointment but ehn is that look my right arm and shoulder has gottn worst now my left arm and bicept hurt so bad, my middle of my back my kidneys and lower back hurt so bad it hard to lay down on my back and i have aching pain sharp pain around my kidneys area and i do no where my kidneys at i am going through serious pain.

1/8/21 Kite Response [Angele James, RN]: Plan/Action: Nursing is not seeing prisoners for chronic complaints or non-urgent needs at this time. You are scheduled with the medical provider for your chronic care visit next month. Be sure you are drinking at least 8 (8oz) cups of water daily and doing simple stretches to help with muscle tension in your should and back. When muscles are not used, they deteriorate causing more pain. The medical provider is monitoring your kidney issues with labwork and you have more labwork scheduled next month as well.

1-21-21 Medical Kite: This kite is dealing with me having a fight in my room with my bunkie was trying to hold on me and i hit my left side of my face on the bed rell and when i was in the hole i seen a nurse but my eye was not swollen after four to five hours, around my eye is black in blue and under my eye lid feels like in fracture the nurse told Sgt Tanner if my eye don't go down put in a Kite ASAp my vision is very poor and pain.

1/24/21 Kite Response [Angele James, RN]: Plan/Action: Your complain is confusing. A nurse visit is being requested for assessment of your condition.

1-21-21 Medical Kite: Hello again dealing with a fight in my room with my bunkie at that time i find out later doing that day's my right arm hurt real bad as it was mess up doing rotor cup tear and bicept it hard for me to close my hand and it hurt real bad when i try to turn my arm. now doing the fight he was wrestling with me and he had my arm in server pain.

1/24/21 Kite Response [Angele James, RN]: Plan/Action: Discuss at Nurse visit which was prompted by previous kite.

2/26/21 Medical Kite: Any and ALL request(s) made by P.A. Jindal to The Pain Committee in Lansing in regard to the chronic pain and suffering of my right shoulder and Dr. Freehill at the U.M. medical section report and recommendations. Report reasons for the denying by the Pommittee. And, if known, the name of the physician's who are responsible for the denial of P.A. Jindal's request.

3/1/21 Kite Response [Carrie Shafer]: Plan/Action: CHJ-121 and CHJ-258 Forms attached. Comments: Please return frms along with a completed disbursement forms to medical's records in order to process request.

3-1-21 Medical Kite: This is another problem i have with my right leg and my kneecap is swollen and popping and my hip is giving me numbness and sharp pain. When i talk to jindal i forgot to let her no about my leg i was on a cane before and to be seen do to my leg.

3/3/21 Kite Response [Mary Velarde, RN]: Plan/Action: The facility is currently under outbreak status. When normal operations resume routine appts will be scheduled again. If your condition worsens or becomes an emergency then have the unit officer contact healthcare to arrange for an assessment of your symptoms. The hip pain likely results from altered gait associated with favoring your swollen knee. Popping sensation may be related to a meniscal tear. Rest the knee, practice non-weight bearing range of motion, use otc meds for pain relief. Comments: knee and hip pain.

3/1/21 Medical Kite: I am ask you did my pain management which was ask to put me in to see a soctor or specialist which i dorgot to ask the PA did they approved that request was ask from shoulder specialist dealing with my neck and nerves they approved my shoulder shot i have that done but what up with the other request.

3/1/21 Kite Response [Mary Velarde, RN]: Plan/Action: You will be notified if you are scheduled to off site treatment/consults at an appropriate time. None are seen in the schedule. Discuss pain management and/or neurology consult with the MP at your next appt. Comments: CCC in August.

5-15-21 Medical Kite: I need to no about my x-ray i just taken last month dealing with my shoulder and right arm i can not sleep or lay now on both arm with

dealing now with serious pain and the medication for pain is not helping me at all and my right arm giving me numbness and serious pain.

5/16/21 Kite Response [Mary Velarde, RN]: Plan/Action: MP appt in August, continue conservative management until seen by the MP to review the xray findings. Practice range of motion to retain flexibility of the joint. Comments: shoulder pain.

5-15-21 Medical Kite: This is a request to be seen on a couple of issues dealing with my lower back kidney at that been a problems for me now for years i have to stop plenty of time to stretch and have to bend over it like my spine is popping i have been having back issues. my ankles is swell my right knee is swelling need to be seen ASAP do to this request.

5/16/21 Kite Response [Mary Velarde, RN]: Plan/Action: callout scheduled. You may be asked to choose the most pressing concern at the nurse visit. Multiple complaints cannot be accommodated in the time appropriated for individual complaints. You may discuss your multiple issues with the MP at your CCG. Comments: MP appt August.

5/21/21 Medical Kite: I saw the nurse on 5/18/21 and complained of swollen ankles. Without any examination she concluded that it was due to old age. My condition was worsened which I believe is water retention. I am also expericing chest pains and I'm concerned that the water retention may be caused from poor blood circulation.

5/22/21 Kite Response [Mary Velarde, RN]: Plan/Action: Based on your medical history your concern might be better directed to your kidney function as a source for water retention. Limit your use of salt and sugar; consume plenty of water to encourage your body to shed retained water. You have no cardiac history, your blood pressure appears to be well managed. Callout scheduled for complaint of chest pain that you failed to mention when you were seen last week. Comments: renal versus cardio.

5/25/21 Medical Kite: Medical reports from X-Rays of Right Shoulder and Neck. Also, any documented information of Pain Management denying Dr. Freehill's recommendation for Screen Shot on right shoulder and left side of neck. Denial for rehab at U of M Sports Center.

5/26/21 Kite Response [Mary Velarde, RN]: Plan/Action: forwarded to medical records.

6-11-21 Medical Kite: This is a question i kite Health Care or record this is my third request they sent me a paper to sign for the information. I had sent a disbursement for \$1.75 and i have not gotten anything yet i hope you can help me to get the request i ask for and thank you to see what going on to my request. Response: A small note that read "My apologies for the delay C. Shafer".

7-20-21 Medical Kite: Please send me a CHJ-121 form.

7/24/21 Kite Response [Mary Velarde, RN]: Plan/Action: Enclosed.

On 8/6/21 talked to Defendant Jindal and explained to her that I was in a lot of pain which is very sever; I told her this several time. I was handcuffed at the time and I was told that I needed to be tested for COVID-19 (which I don't have to be). Told that tests needed to be done. Asked what tests and got no response. Defendant Angele James was a witness to this event.

APPENDIX C

Michigan D.O.C. Authorization letter &
Henry Ford Health System / MRI Results

MICHIGAN DOC AUTHORIZATION LETTER

| | | | |
|------------------------------|------------------------------------|---------------------------|---|
| Service Authorized: | Office Visit - Orthopedic Surgery | | |
| Effective Date: | 4/29/2019 | Visits Authorized: | 1 |
| Responsible Facility: | GUS HARRISON CORRECTIONAL FACILITY | | |
| Tracking Number: | 00797426 | | |
| Provider: | UNIVERSITY OF MICHIGAN HOSPITAL | | |

Note to Provider of Services:

- This health plan is administered by Blue Cross Blue Shield of Michigan. While coverage remains in force, members are entitled to benefits under the applicable plan, subject to exclusions and limitations.
- Participating doctors and hospitals are independent providers and are neither agents nor employees.
- Please see the patient identification information at the bottom right of this form for claim information.



**Blue Cross
Blue Shield**
of Michigan

A nonprofit corporation and independent licensee of Blue Cross and Blue Shield Association.

Provider Services: 1-800-676-2583

Company Name:

Corizon
Michigan Department of Corrections

Group Number:

71499

The consulting physician should complete this section. The completed form will be sealed in the attached envelope and returned with an officer to the correction facility.

Clinical Summary or Attached Report

Recommend consult with PM+R to work up his neck
Schedule image guided (R) shoulder glenohumeral injection
Flu in Clinic PRN

☐ Follow-up visit needed (including time frame)

*** For security and safety, please do not inform patient of possible follow-up appointments. ***

Signature of Consulting Physician

Date

Time

Reviewed By:

Site Medical Provider

Date

Time

Patient Identification

**Corizon:
REFERRAL LETTER**

Name:

WALKER, MARCUS

Inmate Number:

374618

Insurance Number:

994374618

D.O.B.

08/25/1975

Handwritten signature: M. J. P. A. C.


Walker, Marcus L (MRN 100398287) DOB: 08/25/1975 Encounter Date: 12/09/2019

Walker, Marcus L

MRN: 100398287

Office Visit 12/9/2019Michigan Medicine Orthopaedic
Sports Medicine Program |
Domino's Farms

Provider: Freehill, Michael Thomas, MD (Orthopedic Surgery)

Primary diagnosis: Complete tear of right rotator cuff, unspecified whether
traumaticReason for Visit: Follow-up ; Referred by Phys, Self-Refer Or No Pcp/Referring**Encounter Notes**

All notes



Progress Notes from Hirsch, Kristen, Scribe

Additional Documentation

Encounter Info: Billing Info, History, Allergies, Questionnaires

Recent Review Flowsheet Data

There is no flowsheet data to display in this report, but data may be available in complete flowsheet.

[View Complete Flowsheet](#) Some recent data might be hidden**Provider Information**

Authorizing/Billing Provider

Freehill, Michael Thomas, MD

Referring Provider

Self-Refer Or No Pcp/Referring Phys

Level of Service

Level of Service

PC-OFFICE/OUTPT VISIT,EST,LEVL III_RVW .97_ [99213]

LOS History

All Charges for This Encounter

| Code | Description | Service Date | Service Provider | Modifiers | Qty |
|-------|---|--------------|---------------------------------|-----------|-----|
| 99213 | PC-OFFICE/OUTPT VISIT,EST,LEVL III_RVW .97_ Dx: Complete rotator cuff tear or rupture of right shoulder, not specified as traumatic [M75.121], Radiculopathy, site unspecified [M54.10], Cervicalgia [M54.2] Billing Provider: Freehill, Michael Thomas, MD | 12/9/2019 | Freehill, Michael Thomas, MD | | 1 |
| 99051 | PC-MEDICAL SERVICES, EVE/WKEND/HOLIDAY_RVW .33_ Dx: Complete rotator cuff tear or rupture of right shoulder, not specified as traumatic [M75.121], Radiculopathy, site unspecified [M54.10], Cervicalgia [M54.2] Billing Provider: Freehill, Michael Thomas, MD | 12/9/2019 | Freehill, Michael Thomas, MD | | 1 |

Global Billing Information

No global periods active on 12/9/19

Other Encounter Related Information

Allergies & Medications

History

Walker, Marcus L (MRN 100398287) DOB: 08/25/1975 Encounter Date: 12/09/2019

- Patient-Entered Questionnaires
- Specialty Specific Documentation
- Marked s Reviewed
- Implants

Encounter Status

Closed by Wagner, Kristen Michele, ATC on 12/15/19 at 22:42

Orders Placed

IG Steroid Injection Adult

Referral to Sports Medicine and Rehabilitation Adult and Adolescent (PM&R) New Request

Medication Changes

None

Visit Diagnoses

- ◆ Complete tear of right rotator cuff, unspecified whether traumatic M75.121
- Radiculopathy affecting upper extremity M54.10
- Neck pain M54.2

Follow-up and Dispositions

Follow-up and Disposition History

Printed by Aguirre, Kaylene at 1/29/20 12:33 PM



HFAH RAD GENERAL
205 N EAST AVE
JACKSON MI 49201-1753

Walker, Marcus
MRN: 62287923, DOB: 8/25/1975, Sex: M
Adm: 9/5/2018, D/C: 9/5/2018

Results

Arthrogram shoulder right (Accession
i0003281437) (Order 368271277)

Imaging Information

Exam Information

| | | | |
|--|-----------------------|--|--|
| Performed Procedure Arthrogram shoulder right | Study Status Final | Begin Time Wed Sep 5, 2018 1:34 PM | End Time Wed Sep 5, 2018 2:17 PM |
|--|-----------------------|--|--|

Staff Information

| | | | |
|---|-------------------------|------------------------------|-------------------------|
| Technologist Diana C O'Rourke-Dennis | Transcriptionist N/A | Assigned Physician(s) N/A | Assigned Pool(s) N/A |
|---|-------------------------|------------------------------|-------------------------|

Verification Information

| | |
|--------------------------------|--------------------------|
| Signed By Eric G Hoover, MD | Signed On Sep 5, 2018 |
|--------------------------------|--------------------------|

Study Result

ORDER DATE: 9/5/2018 2:17 PM
PROCEDURE: ARTHROGRAM, SHOULDER RIGHT

REASON FOR EXAM: RT shoulder pain

ADDITIONAL HISTORY: Pt states: anterior and lateral RT shoulder pain, with RT arm numbness and weakness x 7 months. Injured shoulder in Feb dead lifting. No prev sx ;

Contrast: GADOBENATE DIMEGLUMINE 529 MG/ML(0.1 MMOL/0.2 ML)

INTRAVENOUS SOLUTION 0.1 mL; IOPAMIDOL 61 % INTRAVENOUS SOLUTION 8 mL;

RIGHT SHOULDER ARTHROGRAM

PROCEDURE: Following full explanation of the procedure, risk, benefits and opportunity to ask questions, informed consent was obtained. The procedure was performed by Clifton L Breiler RPA under direct supervision of Dr. Hoover.

A site over the inferior right shoulder joint was selected using fluoroscopic guidance. The site was then cleaned and draped in the routine sterile fashion. 1% Lidocaine local anesthesia was infiltrated into the skin and deeper subcutaneous tissues. Under careful fluoroscopic observation a 22-gauge spinal needle was advanced into the right shoulder joint. After confirming the position of the needle in the shoulder joint, 14 mL of a mixture of 8 mL of Isovue-300, 10 mL sterile water as well as 0.1 mL Magnevist was injected. A spot film was taken for documentation. There is a large subacromial spur.

Patient tolerated the procedure well and was discharged to the MRI department for further imaging.

IMPRESSION:

1. Successful right shoulder arthrogram as described above.
2. Large subacromial spur.



HFAH RAD GENERAL
205 N EAST AVE
JACKSON MI 49201-1753

Walker, Marcus
MRN: 62287923, DOB: 8/25/1975, Sex: M
Adm: 9/5/2018, D/C: 9/5/2018

Imaging Information (continued)

Study Result (continued)

3. Please refer to MRI report for further information.

INITIATED BY: Clifton Breiler, RPA

Interpreted, finalized AND E-SIGNED: Eric Hoover, M.D. at 9/5/2018

3:10 PM

WORKSTATION: DSV5

MDOC: 374618

Questionnaire

Order Entry

| Question | Answer | Comment |
|---|--|---------|
| 1. Reason for exam: | RT shoulder pain | |
| 2. Enter preferred date for study: | 9/7/2018 | |
| 3. Contact number for exam questions: | 517-265-3900 ext 2653235 | |
| 4. Enter preferred imaging site: | HFAH Allegiance Health (517-205-4905) | |
| 5. If this injury is related to an accident, enter the date of the accident/injury: | | |

End Exam

HFAH FLUORO END TIME

| Question | Answer | Comment |
|---|--------|----------|
| 1. Fluoro time: | .4 | 2 images |
| 2. Unit of time: | min | |
| 3. Will this exam be read by a radiologist? | Yes | |

Results

MRI arthrogram shoulder right (Accession
i0003281443) (Order 368271280)

Imaging Information

Exam Information

| Performed Procedure | Study Status | Begin Time | End Time |
|-------------------------------|--------------|----------------------------|----------------------------|
| MRI arthrogram shoulder right | Final | Wed Sep 5, 2018 3:04 PM | Wed Sep 5, 2018 3:41 PM |

Staff Information

| Technologist | Transcriptionist | Assigned Physician(s) | Assigned Pool(s) |
|-----------------|------------------|-----------------------|------------------|
| Travis M Dahlem | N/A | N/A | N/A |

Verification Information

| Signed By | Signed On |
|-------------------|-------------|
| Eric G Hoover, MD | Sep 5, 2018 |

Study Result

Printed on 9/13/18 10:03 AM



HFAH RAD MRI
205 N EAST AVE
JACKSON MI 49201-1753

Walker, Marcus
MRN: 62287923, DOB: 8/25/1975, Sex: M
Adm: 9/5/2018, D/C: 9/5/2018

Imaging Information (continued)

Study Result (continued)

ORDER DATE: 9/5/2018 3:41 PM

PROCEDURE: MRI ARTHROGRAM SHOULDER RIGHT

REASON FOR EXAM: Other Comments; Strain/Sprain shoulder/arm; RT shoulder pain

ADDITIONAL HISTORY: Pt states he injured his rt shoulder lifting weights this past February, pain radiates just past elbow, weakness and numbness in rt arm and hand, decreased ROM. SX: brain to remove bullet, did not penetrate brain tissue, lt leg to remove bullet. No CA; history.

MRI RIGHT SHOULDER WITH CONTRAST (POST ARTHROGRAM)

TECHNIQUE: Right shoulder arthrogram was performed prior to the MRI, with intra-articular injection of 0.1 mL of gadolinium mixed in iodinated contrast. Axial T1, axial T2 fat-suppressed, coronal oblique T1 fat-suppressed and T2 fat-suppressed, sagittal oblique T1 and T2 fat-suppressed and ABER T1 fat-suppressed images were performed.

COMPARISON: Right shoulder radiograph August 12, 2018. Right shoulder arthrogram September 05, 2018.

FINDINGS:

Acromion: There is a type 1 acromion. There is a large subacromial spur. The coracoacromial ligament is normal.

Acromioclavicular joint: There is mild osteoarthritis of the acromioclavicular joint.

Subacromial subdeltoid bursa: There is fluid in the subacromial subdeltoid bursa. There is contrast in the subacromial subdeltoid bursa.

Rotator cuff: There is normal muscle bulk throughout the rotator cuff.

There is a full-thickness, near complete tear of the right supraspinatus tendon measuring 1.6 cm x 1.6 cm and AP and transverse dimension (image 16 sagittal T1 and image 14 coronal T1).

There is a partial-thickness, articular surface tear of the conjoined tendon attachment of the posterior supraspinatus and anterior infraspinatus tendons measuring 3 cm x 1.6 cm in transverse and AP dimension with medial retraction of the articular surface fibers (image 16 sagittal T1 and image 12 coronal T1).

The subscapularis tendon is hyperintense on both T1 and T2-weighted imaging related to administration of intra-articular contrast.

Biceps tendon: The course and appearance of the long head of the



HFAH RAD MRI
205 N EAST AVE
JACKSON MI 49201-1753

Walker, Marcus
MRN: 62287923, DOB: 8/25/1975, Sex: M
Adm: 9/5/2018, D/C: 9/5/2018

Imaging Information (continued)

Study Result (continued)

biceps tendon is normal without evidence tendinopathy or tear. There is contrast and fluid in the biceps tendon sheath.

Labrum: The bicipital-labral junction is normal. The labrum appears normal.

Glenohumeral joint: There is a contrast in the glenohumeral joint. The articular cartilage is normal. The rotator interval appears normal.

Bones: There is normal marrow signal intensity within the bones of the shoulder girdle.

IMPRESSION:

1. Full-thickness, near complete tear of the right supraspinatus tendon measuring 1.6 cm x 1.6 cm in AP and transverse dimension.
2. Partial-thickness, articular surface tear of the conjoined tendon attachment of the posterior supraspinatus and anterior infraspinatus tendons measuring 3 cm x 1.6 cm in transverse and AP dimension with medial retraction of the articular surface fibers.
3. Fluid and contrast seen within the subacromial subdeltoid bursa secondary to full-thickness supraspinatus tendon tear.
4. Large subacromial spur.
5. Mild osteoarthritis of the acromioclavicular joint.

INITIATED BY: Eric Hoover, M.D.

INTERPRETED, FINALIZED AND E-SIGNED: Eric Hoover, M.D. at 9/5/2018 4:17 PM

WORKSTATION: DSV5

MDOC: 374618

Questionnaire

Order Entry

| Question | Answer | Comment |
|------------------------------------|--|---------|
| 1. Enter preferred imaging site: | HFAH Allegiance Health (517-205-4905) | |
| 2. Additional Comments: | RT shoulder pain | |
| 3. Enter preferred date for study: | 9/7/2018 | |
| 4. Protocol decision preference: | Radiologist determines exam protocol including IV | |



HFAH RAD MRI
205 N EAST AVE
JACKSON MI 49201-1753

Walker, Marcus
MRN: 62287923, DOB: 8/25/1975, Sex: M
Adm: 9/5/2018, D/C: 9/5/2018

Imaging Information (continued)

Questionnaire (continued)

5. Contact number for exam questions: contrast
517-265-3900 ext 2653235
6. If this injury is related to an accident, enter the date of the accident/injury:

Begin Exam

HFAH GENERAL MRI QUESTIONS:

| Question | Answer | Comment |
|--|--------|---------|
| 1. Is this a limited study? | | |
| 2. What symptoms/issues are you having that pertain to this exam? | | |
| 3. Do you have pain? | | |
| 4. Where is your pain located? | | |
| 5. Do you have pain in your arms? If so, where? | | |
| 6. Do you have pain in your legs? If so, where? | | |
| 7. How long have you been in pain? | | |
| 8. Has there been an injury? | | |
| 9. When did the injury occur? | | |
| 10. Do you have any numbness, if so where? | | |
| 11. Do you have any weakness? If so, where? | | |
| 12. Have you had any bowel or bladder changes? If YES, describe. | | |
| 13. Have you or a family member had a history of a brain aneurysm? If yes, please explain. | | |
| 14. Has an ultrasound been done of this area and at what facility. | | |

End Exam

HFAH LIMITED/SPECIAL NEED

| Question | Answer | Comment |
|-----------------------------|--------|---------|
| 1. Is this a limited study? | | |

HFAH MRI SPECIAL PTS

| Question | Answer | Comment |
|--|--------|---------|
| 1. Special needs patient needing extra time? (anesthesia, claustrophobia, pt condition, etc) | | |

END OF REPORT

APPENDIX D

**MDOC Consultation Request & Denial
[Orthopedics]**

Michigan Department of Corrections

Consultation Request

Offender Name: WALKER, MARCUS L

Off #: 0374618

Location: ARF

Date of Birth: 08/25/1975

Sex: M

Consultation/Procedure Requested: Orthopedics - Consultation

Subtype: HFAH Orthopedic Group

517-205-1431

1201 E. Michigan Ave, Suite 300 - Jackson - 49201

Reason for Request:

Pt with hx of injury to the right shoulder and bicep in 2019. He c/o pain, decreased ROM, sleep disruption, inability to form a fist, RUE weakness. Sept 2019 MRA/MRI showed full-thickness, near complete tear of the right supraspinatus tendon. Partial thickness articular surface tear of the conjoined tendon attachment of the posterior supraspinatus and anterior infraspinatus tendons. Large subacromial spur. Has tried physical therapy, steroid injections, formulary and non-formulary medications. Unable to get updated x-ray at this time due to COVID, no on-site x-ray available at this time. +Yergasons, +Speeds test on physical examination. 3/5 grip strength on RUE.

Medications (As of 03/01/2021)

AMITRIPTYLINE HCL 150 MG TABS Exp: 02/01/2022 SIG: TAKE 1 TAB (150MG) BY MOUTH AT BEDTIME FOR 365 DAYS PILL LINE ONLY - ACMO EXP ON 02/02/2022

AMLODIPINE BESYLATE 5 MG TABS Exp: 08/23/2021 SIG: TAKE 1 TAB BY MOUTH EVERY DAY

APAP 325MG TABS Exp: 08/24/2021 SIG: one (1) to two (2) tabs By Mouth three times daily as needed x 365 day(s)

FAMOTIDINE 20 MG TABS Exp: 08/24/2021 SIG: one tab By Mouth two times daily as needed x 365 day(s)

LACTULOSE 10GM/15ML (946ML) Exp: 08/24/2021 SIG: 30 mL By Mouth two times daily as needed x 365 day(s)

LISINOPRIL 40 MG TABS Exp: 08/24/2021 SIG: one tab By Mouth daily x 365 day(s)

MULTI-VITAMINS W/MINERALS/FE TABS Exp: 05/22/2021 SIG: TAKE 1 TAB BY MOUTH DAILY FOR 180 DAYS

PANTOPRAZOLE SOD 40 MG TBEC Exp: 08/24/2021 SIG: one tab By Mouth two times daily as needed x 365 day(s)

SENNA 8.6 MG TABS (UD) Exp: 08/24/2021 SIG: two tabs By Mouth three times daily as needed x 365 day(s)

Thera-M Oral Tablet Exp: 06/04/2021 SIG: TAKE 1 TABLET BY MOUTH DAILY X 180 DAY(S)

VERAPAMIL HCL SR120 MG TBCR Exp: 08/24/2021 SIG: one tab By Mouth daily x 365 day(s)

VERAPAMIL HCL SR120 MG TBCR Exp: 08/24/2021 SIG: TAKE 1 TAB BY MOUTH DAILY X 365 DAY(S)

Allergies (As of 03/01/2021)

No Known Allergies

Health Problems (As of 03/01/2021)

Inj musc/tend the rotator cuff of right shoulder, sequela, Cervicalgia, Abnormal results of kidney function studies, Essential (primary) hypertension, Gastro-esophageal reflux disease without esophagitis, Constipation, unspecified, Risk Score Intermediate - 3 to 6 Months, Headache, Acute upper respiratory infection, unspecified, Contact w and exposure to oth viral communicable diseases, Risk Score Low - 6 to 12 Months

Offender Requires Translator: No **Language:**

Additional Records Required:

Comments:

ref 00927519

Requested By: Jindal, Rosilyn [RJ1] PA

Auth#: 00927519

Ordered Date: 02/24/2021 12:05

Priority: Routine (review within 14 days)

Michigan Department of Corrections

Consultation Request

Offender Name: WALKER, MARCUS L

Off #: 0374618

Location: ARF

Date of Birth: 08/25/1975

Sex: M

Consultant Findings

Offender Name: WALKER, MARCUS L

Off #: 0374618

Date of Birth: 08/25/1975

Sex: M

Institution: GUS HARRISON CORRECTIONAL FACILITY
2727 E. Beecher Street
Adrian, Michigan 49221
517 - 2653900

Completed By:

Report may be hand-written or (preferably) typed on this form. If dictated on office or hospital letterhead to follow, please indicate essential findings or recommendations to be acted upon pending final report.

Follow-up services and primary responsibility for offender health care remains with MDOC staff. While discussion of diagnostic/treatment options with the offender may be appropriate, they are subject to review by the offender's primary care provider, the institution utilization review committee and/or the MDOC Formulary.

Please notify institution prior to scheduling surgery dates or follow-up appointments.

Offender not to be informed of appointment dates.

Michigan Department of Corrections

Consultation Request

Offender Name: WALKER, MARCUS L

Off #: 0374618

Location: ARF

Date of Birth: 08/25/1975

Sex: M

Request Approval Actions:

Refer up by Whipple, Connie [CW13] acting in the role of 1st Level Review on 02/24/2021.

Comments: ref 00927519

ATP by Whipple, Connie [CW13] acting in the role of 2nd Level Review on 02/24/2021.

Comments: ATP: Based on the information provided, medical necessity not demonstrated at this time. Consider obtaining x-ray, and utilizing a form of oral analgesia

Vivien Dorsey MD-*This is the reviewing physician ONLY, specialists should not be contacting them directly. Any further communication, documents, or questions should be directed to the Site Medical Provider listed above.*
02/24/2021

APPENDIX E

MDOC Consultation Request & Denial
[Pain Management]

Michigan Department of Corrections

Consultation Request

Offender Name: WALKER, MARCUS L

Off #: 0374618

Location: ARF

Date of Birth: 08/25/1975

Sex: M

Consultation/Procedure Requested: Pain Management - Consultation

Subtype: HFAH - Pain Center

517-205-4841

1201 E. Michigan Ave., Suite 200 - Jackson - 49201

Reason for Request:

44 yr old male with chronic R shoulder and neck pain that is severe. Pain is disrupting his sleep and he is unable to make a fist. Has had extensive workup of R shoulder and found to have complete rotator cuff tear. Went to PT and completed HEP 3/14/19, still had significant pain. Saw U of M ortho who recommended physical medicine and rehabilitation consultation for work up of neck for cervicalgia and radiculopathy.

Medications (As of 03/01/2021)

AMITRIPTYLINE HCL 150 MG TABS Exp: 02/01/2022 SIG: TAKE 1 TAB (150MG) BY MOUTH AT BEDTIME FOR 365 DAYS PILL LINE ONLY - ACMO EXP ON 02/02/2022

AMLODIPINE BESYLATE 5 MG TABS Exp: 08/23/2021 SIG: TAKE 1 TAB BY MOUTH EVERY DAY

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FAMOTIDINE 20 MG TABS Exp: 08/24/2021 SIG: one tab By Mouth two times daily as needed x 365 day(s)

LACTULOSE 10GM/15ML (946ML) Exp: 08/24/2021 SIG: 30 mL By Mouth two times daily as needed x 365 day(s)

LISINOPRIL 40 MG TABS Exp: 08/24/2021 SIG: one tab By Mouth daily x 365 day(s)

MULTI-VITAMINS W/MINERALS/FE TABS Exp: 05/22/2021 SIG: TAKE 1 TAB BY MOUTH DAILY FOR 180 DAYS

PANTOPRAZOLE SOD 40 MG TBEC Exp: 08/24/2021 SIG: one tab By Mouth two times daily as needed x 365 day(s)

SENNA 8.6 MG TABS (UD) Exp: 08/24/2021 SIG: two tabs By Mouth three times daily as needed x 365 day(s)

Thera-M Oral Tablet Exp: 06/04/2021 SIG: TAKE 1 TABLET BY MOUTH DAILY X 180 DAY(S)

VERAPAMIL HCL SR120 MG TBCR Exp: 08/24/2021 SIG: one tab By Mouth daily x 365 day(s)

VERAPAMIL HCL SR120 MG TBCR Exp: 08/24/2021 SIG: TAKE 1 TAB BY MOUTH DAILY X 365 DAY(S)

Allergies (As of 03/01/2021)

No Known Allergies

Health Problems (As of 03/01/2021)

Inj musc/tend the rotator cuff of right shoulder, sequela, Cervicalgia, Abnormal results of kidney function studies, Essential (primary) hypertension, Gastro-esophageal reflux disease without esophagitis, Constipation, unspecified, Risk Score Intermediate - 3 to 6 Months, Headache, Acute upper respiratory infection, unspecified, Contact w and exposure to oth viral communicable diseases, Risk Score Low - 6 to 12 Months

Offender Requires Translator: No

Language:

Additional Records Required:

Comments:

Reference Number: 00867997

Requested By: Jindal, Rosilyn [RJ1] PA

Auth#: 00867997

Ordered Date: 02/27/2020 13:18

Priority: Routine (review within 14 days)

Michigan Department of Corrections

Consultation Request

Offender Name: WALKER, MARCUS L

Off #: 0374618

Location: ARF

Date of Birth: 08/25/1975

Sex: M

Consultant Findings

Offender Name: WALKER, MARCUS L

Off #: 0374618

Date of Birth: 08/25/1975

Sex: M

Institution: GUS HARRISON CORRECTIONAL FACILITY
2727 E. Beecher Street
Adrian, Michigan 49221
517 - 2653900

Completed By:

Report may be hand-written or (preferably) typed on this form. If dictated on office or hospital letterhead to follow, please indicate essential findings or recommendations to be acted upon pending final report.

Follow-up services and primary responsibility for offender health care remains with MDOC staff. While discussion of diagnostic/treatment options with the offender may be appropriate, they are subject to review by the offender's primary care provider, the institution utilization review committee and/or the MDOC Formulary.

Please notify institution prior to scheduling surgery dates or follow-up appointments.

Offender not to be informed of appointment dates.

Michigan Department of Corrections
Consultation Request

Offender Name: WALKER, MARCUS L

Off #: 0374618

Location: ARF

Date of Birth: 08/25/1975

Sex: M

Request Approval Actions:

Refer up by Pfeil, Kaelynn [KP4] acting in the role of 1st Level Review on 02/27/2020.

Comments: Reference Number: 00867997

ATP by McCool, Connie [CM12] acting in the role of 2nd Level Review on 03/04/2020.

Comments: ATP: Medical necessity not demonstrated at this time. work up of neck for cervicalgia and radiculopathy may be completed on site.

Papendick, Keith, MD-*This is the reviewing physician ONLY, specialists should not be contacting them directly.
Any further communication, documents, or questions should be directed to the Site Medical Provider listed above.*
03/04/2020

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION

MARCUS L. WALKER,
Plaintiff,

Case No.

-v-

DR. MARY GREINER, et al;
Defendants.

CERTIFICATE OF MAILING

The undersigned states that on November 22, 2021 that he caused to be mailed the original of: Complaint with Jury Demand; Verification; Appendics [A thru E]; Certificate of Mailing, with a check/money order in the amount of \$402.00 for filing fees and administrative fees, to:

Clerk of the Court
United States District Court
Eastern District of Michigan
Theodore Levin U.S. Courthouse
231 W. Lafayette Blvd., Rm 554
Detroit, Michigan 48826

by giving to prison administrative staff, to be placed in the outgoing mail, via Legal Expedited Mail.

I declare under the penalty of perjury that the foregoing is true and correct. 28 U.S.C. §1746(2).

Dated: November 22nd, 2021

Marcus L. Walker

Marcus L. Walker pro se

Marcus Walker #374618
Gus Harrison Correctional Facility
2727 East Beecher Street
Adrian, Michigan 49221



RECEIVED
DEC 09 2021
CLERK'S OFFICE
U.S. DISTRICT COURT

12/21/21

Clerk of the Court
United States District Court
Eastern District of Michigan
Theodore Levin U.S. Courthouse
231 West Lafayette Boulevard, Room 554
Detroit, Michigan 48226